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ABSTRACT

This document records proceedings of the joint hearings on the Child and Family Services Act, 1975 (bills S.626 and H.R.2966). Included are witnesses' testimony of June 20, and July 15, 1975, statements presented, and additional information (including related publications, communications, resolutions and responses). (SB)

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CHILD AND FAMILY SERVICES ACT, 1975

JOINT HEARINGS

BEFORE THE

SUBCOMMITTEE ON CHILDREN AND YOUTH

AND THE

SUBCOMMITTEE ON EMPLOYMENT, POVERTY, AND MIGRATORY LABOR

OF THE

COMMITTEE ON LABOR AND PUBLIC WELFARE

UNITED STATES SENATE

AND THE

SUBCOMMITTEE ON SELECT EDUCATION

OF THE

COMMITTEE ON EDUCATION AND LABOR

HOUSE OF REPRESENTATIVES

NINETY-FOURTH CONGRESS

FIRST SESSION

ON

S. 626 and H.R. 2966

TO PROVIDE FOR SERVICES TO CHILDREN AND THEIR FAMILIES, AND FOR OTHER PURPOSES

JUNE 20 AND JULY 15, 1975

PART 9

Printed for the use of the Senate Committee on Labor and Public Welfare and the House Committee on Education and Labor

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p. 2392	"Black-Market Babies: $4,000 to $40,000." U.S. News & World Report; May 19, 1975.
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CHILD AND FAMILY SERVICES ACT, 1975

FRIDAY, JUNE 20, 1975

U.S. SENATE,
SUBCOMMITTEE ON CHILDREN AND YOUTH AND THE
SUBCOMMITTEE ON EMPLOYMENT, POVERTY,
AND MIGRATORY LABOR OF THE
COMMITTEE ON LABOR AND PUBLIC WELFARE;
AND THE SUBCOMMITTEE ON SELECT EDUCATION,
OF THE HOUSE COMMITTEE ON EDUCATION AND LABOR,
Washington, D.C.

The joint subcommittees met, pursuant to notice, at 9:30 a.m., in room 2175, Rayburn House Office Building, Hon. William Lehman presiding pro tempore.

Present: Representatives Lehman, Brademas, Beard, Cornell, Miller, and Hall.

Also present: Senator Stafford.

Mr. LEHMAN. The Select Education Subcommittee will come to order.

Without objection, we will ask Dr. Ben Sheppard, president of the Dade County School Board, Miami, Fla., to come forward. Dr. Sheppard has a very distinguished and formidable record not only in education but in medicine as well. He is a former juvenile judge and head of the methadone clinic and is active in other areas of drug abuse. I think that Dr. Sheppard is the nearest thing that we have to a—well, I don't like to use that word—but about the only saint we have got down there.

Dr. Sheppard.

STATEMENT OF BEN SHEPPARD, M.D., PRESIDENT, DADE COUNTY SCHOOL BOARD, MIAMI, FLA.

Dr. SHEPPARD. I have provided the committee's staff with copies of my prepared statement. However, I will take just a few minutes to indicate to the subcommittee observations regarding the need for child and family service legislation and observations on the proposed child and family services bill.

The need for expanded services, particularly comprehensive child care services, in large urban areas such as Dade County, Fla., need not be further documented. In our community there are over 285,000 children who are less than 14 years old. We have more than 225,000 working mothers. In fact, there are over 36,000 children under 6 years of age whose mothers work. Yet, indications are that less than 9,500 are served in child care programs.

The proposed legislation has many features which contribute some long overdue assistance to local communities in their attempts to resolve the child care crisis. The emphasis on coordinated delivery of services at the national, State and local levels is perhaps the single most positive potential outcome of the legislation. If the Federal moneys expended can significantly change the fragmentation of responsibility for providing service and changes nothing else, the funds will have been well spent.

As a school board chairman, I welcome the opportunity for the school district to assume major responsibilities for the development and delivery of the educational component and of a staff training component of a comprehensive child care program and as a physician I fully understand that we must look to other agencies to provide health care. As a consultant to the Catholic Service Bureau, I recognize that the family counseling and other social services must be provided by agencies other than the schools. Much of the nutritional services needed in our community must also be provided outside of the educational agency, but the delivery of all these services must be coordinated since individuals are in need of all services.

Elimination of duplication of effort, clearly defined agency responsibilities, mechanisms for interagency cooperation, realistic involvement of the community in planning, and funds to develop programs and facilities should help greatly. I must stress the importance of funds for facilities. In those communities which most need child and family services, there are generally no adequate facilities to house programs. The schools are overcrowded and often, where these programs do exist, they are housed in substandard, nonpublic facilities which are totally inappropriate.

Finally, let me state there is a major need to establish minimum standards for child care programs. Too often, standards are set which influence the physical environment of the child in the program, but rarely are there safeguards built in to insure the quality of the intellectual and the emotional environment in which the child functions. Attention must be given to the quality of the program. Each aspect of service, educational, medical, nutritional or social, must have built in quality control. The foundations laid in a child care program must provide a basis on which the structure of a life of quality and dignity can be built.

The physical care versus the medical care. It would be redundant for me to say, for example, that the nutritional care of the expectant mother has some direct relation to the mental abilities of the child to be born. I have a very distinct feeling about what the medical care should be. Many of our children who are labeled hyperkinetic, many of our children who are labeled substandard can easily be detected by such simple tests as the tests for hypoglycemia and the tests for thyroid.

I find that we lay great stress in our hospitals which deliver and have delivery rooms on the tests of the PKU and still it is a well known fact in several States in the Union there are developed ways of detection for hearing deficiencies as early as the sixth and seventh day once the middle ears are cleared. Hearing is a problem which we have a great deal of difficulty with in our schools. Only yesterday I refereed a fight between the oral and the other type of deaf learning programs.

If in our child care programs sufficient built-in directions protecting and securing sufficient funds for what we call liaison with the hospital to do the simple things such as an electroencephalogram, the hypoglycemia test, the thyroid development—if those things can be provided in the usual child care program, we will be taking giant steps toward prevention because prevention must be before the fifth year of age.

Mr. LEHMAN. Dr. Sheppard, your last statement in regards to diagnostic review of various handicaps certainly fits in well with the kind of legislation that this committee just reported out for the action of the House of Representatives in regards to education for the handicapped. In that legislation we are providing a role for diagnostic centers so that we can deal with not only the problem of the handicapped but be able to identify the problem of the handicapped child in education.

What I think you are trying to get to us on is the fact that the best way to recognize the handicapped is at the preschool level before it becomes a fact of life necessarily for that child.

Dr. SHEPPARD. Yes. I feel very strongly that this can be done. I think that in our program, for example, down at Dade County we have instituted a screening process in which every child of the first grade level has a psychological screening. With 14,000 children we have identified over 400 children who need further evaluation. The simple screening test is something that can be done by the school or the teacher and then carried on by the clinical psychologist and finally for the medical evaluation.

Mr. LEHMAN. We have a few problems in regards to this legislation on family and child care. One of the problems has to deal with who should be the prime sponsor or the major sponsor. Do you think the major sponsor or the prime sponsor in the area should be the public school system or should it also include other nonprofit organizations or is it possible even to deal with, say, profitmaking or private day care centers. Should this legislation include all of them, or should we more or less at this point perhaps limit the kinds of private sponsors we have? How do you think the public schools would deal with preschool children in this manner?

Dr. SHEPPARD. I think you come up against the traditional fight there. The educators are there just to educate and they don't want to be bothered too much. This is a fight that I have waged for the last 6 or 7 years, going so far as to try to get dormitories in our gyms for the children of working mothers for at least 5 days a week. I think the public schools should take the lead, I think the recognized agencies should work along with them and I think that the two should coordinate their programs and their standards as set forth in the bill.

Mr. LEHMAN. Have you had experience with the run of the mill, just the ordinary day care centers that the working mothers usually have to deposit their children in or the facilities where the child is left until such time as it is able to go to school? We have had these private institutions and private organizations testifying before us that this kind of a program if we do not include them in as a prime sponsor that it would practically put them out of business and it would be unfair to private enterprise.

Dr. SHEPPARD. I don't care what it does to private enterprise. I am more interested in what it does to the child and the day care center which is just a dumping ground which is definitely correlated with the earning capacity of the single parent, we will say, to hold the child until they come back from work.

Mr. **Lehman.** Is there any State regulation or local regulation of the quality of care in Dade County of students that are placed in these private day care centers that you know of?

Dr. **Sheppard.** Not really. I think until that is accomplished, until standards are set, until requirements are met, then we are batting our heads against the wall.

Mr. **Lehman.** I have to agree with you until we set certain standards, I would be a little reluctant to go in that direction.

There is another problem that we deal with: Whether we should include in this legislation for these centers parent advisory boards. Do you think that we should set up a regional or a district or even a State parent advisory board to assist in the implementation of this legislation and, if so, what kind of a role should it play?

Dr. **Sheppard.** I think you should have the local say in Dade County parent advisory boards and I think that they should definitely advise and help with the programs as they go along. I think without the involvement of the parents you are going to be lost and I think they should work with us at the local level.

I don't care for State. I am afraid of tremendous bureaucracies. Until the time comes that it takes more than $4 to get two blood tests or get two blood tests rather and $4 for two certificates, until the time comes when we can do something about that, I think we are going to have to step in and assume the role of the protector. The child is the prime factor.

Mr. **Lehman.** There has been some testimony from people who are concerned that this kind of legislation would be a threat to the security of the family itself, that this kind of day care center would undermine or perhaps undermine the role of the family in the rearing or in the development of the child. Can you conceive of this kind of legislation being such a threat to the family or institution?

Dr. **Sheppard.** I think, Congressman, if I may, this type of legislation would be welcome by the parents.

On page 2 of the proposed bill I think any intelligent parent would say, when you go down to section 2 regarding prenatal and other medical care to expectant mothers and the incidents of handicapping conditions—I think you can't get a parent in the world who would disagree with that.

I think when you come to the other sections of food and nutritional service, when you come to diagnosis, identification and treatment of visual, speech, medical, psychological, and emotional barriers to full participation programs, those of us who have children and know what happens with the problem of getting an orthodontist and the problem of bite and talk, I think they would welcome this sort of thing.

I think the special activities to ameliorate handicaps and disabilities as an incorporated part of the program under the act is excellent. Programs designed to extend child care against particularly parent participation and to kindergarten and primary grades I think is excellent.

Training and education, both pre-service and in-service for professional and other personnel, including parents and volunteers, is really hitting the nail right on the head.

The first thing I did when I decided I was going to go into medicine, I went into pediatrics. The change in the field of pediatrics over the last 10 years is really remarkable. They have come to recognize that the examination not only includes the question of whether there is a murmur or not or whether there is an enlarged tonsil or not but it includes the fact that there might be a learning disability.

The discussions with the mothers are great. If possible, I wish you would incorporate in this bill to do away with the test which reads letters at 20 feet. This is a bogeyman to me because if children come home and say, "Look, Maw, I have 20/20 vision," the parent assumes immediately that the child can read because they have 20/20 vision. I think education along those lines would help greatly because the doctor will listen to what the parent has learned in the training programs but that test is not the final answer as to reading abilities.

Mr. **Lehman**. Then I understand you don't think that this is a threat but rather a helpful program for the family stability and the health of the child.

Before we move on to the next question I just would like to point out several areas which you have been very much involved in. One is drug abuse and two is the delinquent child—the drug abuse of course in relation to not only the private practice but in your methadone clinic, your delinquency that you dealt with in regards to your role as juvenile judge. You have had a great deal of experience with the emotionally disturbed child and also in the educational field.

So as you think in terms of drug abuse, delinquency, emotionally disturbed and the educational situation, how can we view this legislation as helpful perhaps in those four areas and do you see it as a beneficial program to improve a situation in that or to reduce the causes that create these kinds of situations in those four areas?

Dr. **Sheppard**. I think you can lump the four areas into one and say that if you can use prevention in the first few years of life as indicated in this program you have solved the problems. When I was with the court as a juvenile court judge in 1960, that was when my eyes were really opened to the factors which led toward delinquency and which led toward the dropout problem in the schools and in our children.

One, if the schools can detect and help prevent before the 4th and 5th year through working with the parent in all areas, first in the parent cooperation through governing boards, second in educating the professional and the paraprofessional, I think that your job is done. I have spent thousands and thousands of dollars of Dade County school board money in trying to work with the drug problem, and I realize now after 8 years that I was spinning my wheels because by the time they reached the junior high school level they were able to teach the teachers and the teachers didn't know half the time what they were talking about.

If you had the money to provide all our schools with a tremendous building program and do away with those darn double sessions so we could have a single session especially in our area, then that would be a great help. I don't know where you get all the millions that would go for the building of the schools.

Mr. **Lehman**. Thank you, Dr. Sheppard.

Congressman Cornell.

Mr. CORNELL. Doctor, did I understand you correctly to say that in Dade County and in the State of Florida you do not have adequate standards established by law in your view?

Dr. SHEPPARD. We have standards but it is one thing to have standards and another thing to have the forces to go around and see that these standards are met.

Mr. CORNELL. Has any effort been made in the State?

Dr. SHEPPARD. Yes; more and more effort is being made that only properly licensed agencies meet and fulfill and carry out the programs.

Mr. CORNELL. It bothers me that we are continually called upon in the Federal Government to make standards for the States when the responsibility of the police power falls on the States.

Dr. SHEPPARD. We have a standard set by the State.

Mr. CORNELL. Do you think that the standards are adequate? Do you think that the standards are adequate?

Dr. SHEPPARD. No; I do not.

Mr. CORNELL. You do not?

Dr. SHEPPARD. I think they should be improved upon.

Mr. CORNELL. Has any effort been made in the State?

Dr. SHEPPARD. Yes; the last legislature.

Mr. CORNELL. But unsuccessfully?

Dr. SHEPPARD. No. Manpowerwise, we are going through a terrible crunch. The budget for Dade County schools, for example, has been reduced by $20 to $25 million, and that means that a cutting of programs, a cutting of other areas, to help the child is going to have to be done. At our last board meeting, we went back and are coming up with 12 traditional schools, the old three R schools, as an experimental thing is doing away completely with anything other than the three R's.

Mr. CORNELL. Mr. Lehman asked you about whether or not the public school system should be the prime sponsors for child-care centers, and I was not clear on your answer in this respect. I did notice that in your statement you mentioned that the schools are overcrowded, and often where these programs do exist they are housed in substandard nonpublic facilities. Now do I gather from that you do not think the schools should be the place for the child-care centers?

Dr. SHEPPARD. I feel the schools should be.

Mr. CORNELL. Should be.

Dr. SHEPPARD. Should be the place.

Mr. CORNELL. But you feel that funds should be provided to construct adequate facilities, is that right?

Dr. SHEPPARD. That is what I meant to say; yes.

Mr. CORNELL. I see. One other thing; I noted in your statement that you mentioned that there were 36,000 children under 6 years of age whose mothers work, yet indications are that less than 9,500 are served in child-care programs. Have you any idea of who takes care of these children?

Dr. SHEPPARD. The streets.

Mr. CORNELL. Pardon?

Dr. SHEPPARD. The streets.

Mr. CORNELL. For children under 6 years of age?

Dr. SHEPPARD. Neighbors, friends, anything. You name it. Particularly in our lower socioeconomic groups. If they seek the help, they can get it. A total of 9,600 have sought it and are getting it; and with the help of this bill, perhaps we can satisfy the other needs.

Mr. Cornell. I am just wondering though whether that figure is as bad as it appears. I would suspect in a substantial number of cases, the grandparents are taking care of the children or the——

Dr. Sheppard. An uncle or an aunt or a neighbor or something of that sort.

Mr. Cornell. The husband and wife might have different shifts as hours of work.

Dr. Sheppard. I have not gone in depth with that, but there are cases, I know, where husbands work one shift and wives work another shift.

Mr. Cornell. Thank you, Doctor.

Dr. Sheppard. There is pretty strong sentiment for places for the care of these children other than the streets.

Mr. Lehman. Mr. Miller.

Mr. Miller. I have no questions of the witness. I would like to thank him for his testimony.

I do have a question of the committee staff. Some time ago the garment workers put out a report on child care. This goes to Mr. Cornell's question of the number of latchkey children that were estimated that came home with nobody there and did not have either relatives or parents. Do you think you might ask them if they could provide that for the committee. I think it was about 3 years ago, and it was rather devastating the number of very young children who were left on their own throughout the day. Thank you.

Mr. Lehman. I think we will have to recess this for just about 5 minutes until we go and record our presence in the House Chamber. We will all be back in just about 5 minutes.

I want to thank Dr. Sheppard again for his testimony. One thing I think I did leave out in recognizing him is that his activities include not only juvenile delinquency and drug abuse and education, but he has also been very active as a leader in the Catholic charities in that area.

I thank you again for coming, Dr. Sheppard. Wait until I get back because I would like to talk to you in person a little bit.

[Whereupon, the joint subcommittees recessed.]

Mr. Brademas (presiding). The subcommittees will come to order.

Our next witness is Mr. William Welsh, executive director for legislative and political affairs, American Federation of State, County, and Municipal Employees, Washington, D.C.

Mr. Welsh, we are very pleased to have you with us this morning.

STATEMENT OF WILLIAM B. WELSH, EXECUTIVE DIRECTOR FOR LEGISLATIVE AND POLITICAL AFFAIRS, AMERICAN FEDERATION OF STATE, COUNTY & MUNICIPAL EMPLOYEES, WASHINGTON, D.C., ACCOMPANIED BY NANINE MEIKELJOHN, LEGISLATIVE ASSISTANT, AND ROBERT McENROE, ASSISTANT DIRECTOR, AFSCME COUNCIL 1707, NEW YORK, N.Y.

Mr. Welsh. Thank you, Mr. Chairman.

My name is William Welsh, and I am the executive director of the American Federation of State, County, and Municipal Employees.

Accompanying me this morning is Miss Nanine Meiklejohn who is a legislative assistant who works in this area; and Mr. Robert McEnroe, the assistant director of our principal council 1707 in New York City, which has a very large number of members who work in day care centers.

I appear here today on behalf of AFSCME's 710,000 members across the country and on behalf of Richard Morton, executive director of AFSCME council 1707 in New York City, which has our largest day care local. Mr. Morton had hoped to present our statement, but he is involved in important negotiations this morning. We are pleased to have this opportunity to testify on S. 626 and H.R. 2966 which would greatly expand Federal support for child care.

Our interest in this legislation derives from the fact that AFSCME's membership (which is roughly 40 percent women) is a potential conconsumer of the services it would provide and from the fact that AFSCME represents more organized child care workers than any other AFL-CIO union. In New York City alone, we represent about 8,000 day care and 1,200 Head Start workers. We represent substantially more throughout the country.

AFSCME believes that enactment of a Federal child care program such as that in S. 626 and H.R. 2966, which moves toward the goal of universally available child care offering comprehensive services, is long overdue. The number of working mothers with children under 18 has been rising at an accelerated rate: up from 9.9 million in 1966 to 11.6 million in 1971 to 13 million in 1973. Even more dramatic has been the increase in the percentage of working mothers with children under 6, which rose from 14 percent in 1950 to 34 percent in 1973. And these figures do not reflect the effects of inflation and recession which now are eroding individual income and forcing more women to enter the labor market.

Child care opportunities presently made available by Federal assistance are clearly inadequate to meet the needs of the some 26 million working mothers. Existing programs designed to offer child care opportunities for children from poor and minority families continue to fall far short of current needs. Tax deductions may help the well off, but they provide little, if any, help for middle and lower middle income people such as the working men and women we represent. They continue to find quality child care beyond their financial means.

There should no longer be debate over whether the Federal Government should enact child care legislation. Rather discussion should focus on what the essential elements of a Federal child care program should be. I would like to share with you this union's thoughts on some of those issues.

On prime sponsorship, since the veto of the Comprehensive Child Development Act of 1971, rather heated debate has arisen over the issue of prime sponsorship. To a certain extent the prime sponsorship question also has become merged with the question of who should receive funds to operate individual programs and provide services. We believe these two issues should be kept separate because prime sponsorship involves much more than operating programs. It involves overall planning and coordination, selection of service providers, administration, monitoring, evaluating and enforcement of standards.

AFSCME believes that State and local governments should be the prime sponsors, as both S. 626 and H.R. 2966 now provide. We disagree with the position taken by the AFL–CIO that public school systems should be the prime sponsors. President Wurf expressed our position clearly at the AFL–CIO executive board meeting which adopted its current policy and stated our intent to present our views to these committees.

We welcome the debate over prime sponsorship, however, because the delivery system will influence how well other important aspects of a child care program will be achieved.

I would like to discuss some of these other goals and relate them to the delivery system issue.

In this initial stage, it is critical to structure a delivery system that is flexible enough to stimulate the development of a wide variety of innovative child care programs and arrangements, including community based centers and union sponsored centers at the worksite, in which AFSCME is very interested. We believe such flexibility will be much more possible under State and local government prime sponsorship than under public school prime sponsorship.

We fear that public school prime sponsorship would result in a near monopoly of services by the public schools and with the ever present temptation with the funds flowing into the school system to the other problems and needs of that system. Public school prime sponsorship is likely to lead to the creation of more school-like programs and an extension of the regular school program downward. While expanded kindergarten and after-school programs are important, equally important is care for younger children and a variety of different program approaches to meet the particular needs and desires of parents and their children.

Some people point to California as an example of program variety under school prime sponsorship but they neglect to say that the State education department, and not local education agencies, administer the California program. This is very different than local school prime sponsorship. Local schools in California have to compete with other groups for program funds.

AFSCME does not oppose schools operating individual child care programs. Indeed, they may be the best equipped to do so in some places. It also makes sense to use empty classrooms and surplus educational personnel if they are appropriate. However, the schools, like any other agency, should have to demonstrate their capacity to operate quality programs before they receive funds.

It would be a mistake to fall into the trap of accepting the argument that because existing child care delivery systems and programs have inadequacies, other mechanisms and institutions, such as the schools, would do a better job. Any delivery system will have its problems. What is needed is one that has the best chance of establishing a system of accountability and flexibility. State and local government prime sponsorship would do that. Such a structure would be similar to that for Head Start in which community action agencies have the option of delegating program operations to various agencies, including the schools.

Any new child care program should support and build on existing child care delivery systems rather than set up a conflicting system or create the potential for destroying or crippling them. Most public child care funds presently are administered by State and local governments; therefore, they are the most logical prime sponsors for this new program.

The New York City child care system is perhaps the best example. One of the oldest, largest, and best programs in the country, the city's child care program operates under a prime sponsorship structure similar to that now contemplated in the proposed legislation. The city's 420 child care centers are funded from a mix of State and Federal funds, which flow from the State to the city government where they are supplemented with city funds for a total of over $150 million. The program is administered by the city's agency for child development which subcontracts with community based private nonprofit centers.

It makes little, if any, sense to create a second delivery system in that kind of situation where a fully developed structure already exists, which can easily expand its services. In fact, requiring, as both bills do, a priority for expanding ongoing child development programs, which already have expertise and experience, makes eminent good sense. This requirement may be ignored, however, under public school prime sponsorship because of the ease with which school systems could absorb the funds themselves even though they have had little experience with early childhood programs.

Even with a maintenance of effort requirement, which is vital to prevent the substitution of one source of funds for another, current programs receiving State and Federal funds could be crippled under public school prime sponsorship. As program costs rise, the amount of money will buy less and the States will see little reason to put more money into those programs when they see an entirely new delivery system growing.

We feel very strongly that enforcement of standards and licensing, which are part of a prime sponsor's responsibilities, should not be placed in the hands of one of the providers of services. Since education is one important component of early childhood development and since the schools are very likely in many places to receive program funds under any delivery system, it seems to us it would be better to place this responsibility with State and local governments.

Coordination with other social service and manpower training programs is important, as both bills before these committees recognize. Coordination would be achieved better by placing administrative responsibility for child care with the same government entities that administer these other programs.

Strong parental involvement in early childhood development is very important. Our day care members believe that parent participation would not be as strong under school prime sponsorship as under State and local government prime sponsorship. They have not seen any evidence of local schools being responsive to either community needs or parental involvement.

I would like to turn now to several other issues which we believe are important.

AFSCME is opposed to giving Federal funds to proprietary centers and recommends that the bills be amended to exclude them. We are opposed to funding profitmakers for several reasons. First, we philosophically oppose giving public funds to profitmaking institutions.

Public funds should stay in the public or private nonprofit sector. Second, funding proprietary care could create a constituency that would pressure for lower standards because of its interest in keeping costs at a somewhat reasonable level while making a profit. Third, public and nonprofit centers generally provide better care at a lower cost to parents than do proprietary centers.

The National Council of Jewish Women's study, "Windows on Day Care," clearly documented the fact that more of the public and private nonprofit centers surveyed provided care to more children from low income families, were open longer hours, had better staff/child ratios and support personnel, and paid better salaries than the proprietary centers surveyed.

Another study conducted last year by Mary Keyserling of some 90 nonprofit group care centers in New York City revealed that, while few of the 420 centers had licenses, well over 60 percent of the permanent centers studied could be classified as "excellent" or "good"; almost all were open at least 10 hours a day; and almost all met city certification requirements and staffing ratios which, except for 4- and 5-year-olds, are the same as the Federal standards. The study implied that the low number of licensed centers appeared to stem more from administrative difficulties than from inadequacies in the facilities themselves. Since that time almost all the centers have been licensed or have licenses pending. Our members in New York are justly proud of the programs in which they work and invite you, Mr. Chairman, and the other members of these two committees to visit their centers.

While it is true that much public and nonprofit care is not superior, public funds would be better spent upgrading and expanding these programs than supporting proprietary care.

AFSCME opposes permitting prime sponsors to purchase child care services. Buying services for a few children from many centers or from family care providers will make it difficult to enforce standards.

A better way to provide for family care is to attach clusters of family care providers to a child care center; put the providers on a salary basis; and provide training and equipment through the centers. Such an arrangement will provide for tighter quality controls. We recommend that the bills be amended to make it clear that purchase of services would not be permitted.

We are very pleased that both bills require that employees be paid the higher of either the minimum wage or prevailing wage rate. As a union, we do not believe the Federal Government should support any program that pays substandard wages. In addition, if we are to attract high quality personnel, we must be willing to pay decent salaries.

We also are very pleased to see training and career development provisions in both bills. We especially support the provision in H.R. 2966 which authorizes the Secretary of HEW to award grants to professional and paraprofessional day care employees for in-service training.

AFSCME would like eventually to see universally free child care. However, we recognize that Federal budget limitations presently prevent the enormous expenditure of funds that would be needed for such a program. We, therefore, support a fee schedule so that more children could be served by the limited amount of money available under these bills.

In summary, Mr. Chairman, the union believes that a new Federal child care program must provide comprehensive child care services. Coverage and eligibility must be universal, with sliding fee schedules beginning at the BLS lower living standard and based on ability to pay. The program must have a flexible delivery system in which State and local government prime sponsors determine which public and private nonprofit agencies receive program funds.

The delivery system should be structued so that it can build on current programs (including title XX and Head Start) and promote the development of the variety of programs needed to meet the diversity of needs and desires of parents and their children. There must be a strong role for parents; adequate funds and strong mechanisms for enforcement of standards; and sufficient funds for construction, renovation, and preservice and inservice training for staff who should be guaranteed of a decent wage.

Both S. 626 and H.R. 2966 contain most of these elements and we commend their sponsors for the careful thought they have been giving to what we consider a very important issue. We look forward to working with you and stand ready to provide any counsel and assistance you might request.

Mr. BRADEMAS. Thank you very much, Mr. Welsh, for a most thoughtful statement. You have touched on some of the key issues that this subcommittee must clearly be concerned with.

Let me just ask you two or three questions. Are you saying that the primary sponsor should not be the provider of services, that there should be a difference between the two?

Mr. WELSH. It seems to us that there are basically two different functions, and that is the question of the operation of the program and the question of the primary sponsor. If in fact a local government is the prime sponsor, and let us say the school system is part of that local government responsibility, you obviously can't automatically divide that but it would seem to us that it would be better to have the general government in that instance be the prime sponsor rather than, let's say, the school board to be the prime sponsor. That gives you some checks and balances that I think are important.

Mr. BRADEMAS. I think you have been on target in making clear that when we talked about prime sponsors and service providers we were talking about issues that ought to be divided.

Do I understand also that while you do not want the public schools to be prime sponsors you have no objection to public schools providing services when they meet the criteria set forth in the programs in the bill?

Mr. WELSH. Not at all. As a matter of fact, we think that as such a program expands that is where a great many of the activities contemplated under the bill will probably end up. I think the concern we have is maybe illustrated by the previous witness from Dade County where he talked about school systems that are overcrowed and doing dual shifts already in terms of crowded facilities whereas on the other hand in New York City and many other places you have school facilities that are becoming increasingly underutilized because of the falling birth rate and so on. I think what we want to be sure of is that the local government, the general government in these areas takes into account these varying local conditions, and it would certainly be our assumption that a substantial amount of the responsibilities in many areas would in fact end up within the public school system for carrying the program out.

Mr. **Brademas.** Let me ask you some other questions not so directly related to the particular ways in which the legislation might be structured to meet the several issues we have been talking about.

First, one of the basic arguments made against providing child care services for children of Government employees—Government employees being the ones whom you in your union of course represent—is that taxpayers ought not to be subsidizing the care of children for a particular group of employees. What comment do you have on that question?

Mr. **Welsh.** I think in fact, Mr. Chairman, that the public employees should be looked upon in this instance, as in most other instances, as really no different than the employee in the private sector and that if it is sound public policy to provide for a working family the child care facility in the private sector in order to upgrade not only the attention that is paid to the child but also in fact to upgrade the kind of work and concentration and the work that a working parent can give to his position if he knows that his child is in a well conducted child care center, that that advantage both in terms of the job performance and in terms of the child means that there really should be no distinction between the way we approach the need for child care for a public employee as we would for an employee in the private sector. Fundamentally the policy here, it seems to me, and the intent of the legislation and what we are discussing goes to the concern with the child and all of the resources that we can bring to bear on the child through a multiple faceted program in his very early years, and that is really what we want to concentrate on.

Mr. **Brademas.** Two other quick questions and then I will yield to my colleagues.

Do you have any judgment on the question of whether employees prefer to be able to have child care facilities near their homes or near the place where they are employed?

Mr. **Welsh.** Mr. Chairman, why don't I ask Mr. McEnroe who is in fact with the council with the most direct experience that we have in that regard. Maybe he would like to reply to that, Mr. Chairman.

Mr. **McEnroe.** Our experience in New York City is that the preference is very much that the facility be near the home. Obviously, our people work all over the city and many of them travel great distances but the parents of these children are very much interested that the kids go to centers that are in their neighborhoods and they know these centers themselves and they know very much the people who work there.

Mr. **Brademas.** I raise that question in part because I understand that in some other countries some firms are establishing child care facilities within the plants. This is particularly true of large factories.

Mr. **Welsh.** Maybe when we solve our mass transit problem and we would not have to put a 3-year-old on a bus and let him spend an hour-and-a-half getting to and from his day care center we will be able to have more flexibility as to where we locate them, but I think that is maybe the controlling factor in many instances.

Mr. Brademas. I think I will stop at that point and call on Mr. Beard of Rhode Island.

Mr. Beard. Sir, do you see the population, let's say in the next 10 years, dropping in the number of children with the decline in birth rate? Do you see that as a fact?

Mr. Welsh. I think that is at least what my demographic experts tell us is going to in fact occur although I am not sure that that will be entirely the case.

Mr. Beard. That is all.

Mr. Brademas. Let me just ask you one other question before you leave.

Do you have any evidence of the beneficial effect of there being child care services on the work performance of employees in absenteeism, turnover rates, anything of that kind?

Mr. Welsh. Not direct evidence. I don't know. It seems to me that logically that would be the case but I don't know that we have had any direct studies or so on that we are familiar with right now.

Mr. Brademas. Thank you again, Mr. Welsh, and your associates. We appreciate very much, as I said earlier, your most thoughtful testimony.

Thank you.

Mr. Welsh. Thank you.

Mr. Brademas. Our next witness is Ms. Joyce Hatton, president of Young World, Inc., Lansing, Mich.

The Chair would observe that we have an extremely long list of witnesses today, and we ask that witnesses summarize their testimony. Then we will include the entire testimony in the record.

Ms. Hatton, we are very pleased to have you with us today.

STATEMENT OF JOYCE V. HATTON, PRESIDENT, YOUNG WORLD, INC., LANSING, MICH.

Ms. Hatton. Thank you, Mr. Brademas.

I am happy to be here and I really think that you need to be congratulated for the amount of time and effort in your committee, too, that you have put forth in the past 3 or 4 years on behalf of young children. I do intend just to summarize my testimony. I realize that you have a long list of people today.

I have been in the nursery school and day care business since 1957 both in the non-profit and for-profit area. My company, Young World, Inc., is the largest private operator serving economically disadvantaged children in the United States I am told. I don't have any proof other than the fact that many people have said this. We have about 800 children that we serve every year that come from welfare families.

There are four areas that I would like to briefly talk about and why I don't feel at this point that the bill will accomplish its purpose. My reasons are:

One. It does not make economic sense for the public or private sector.

Two. It does not provide leadership.

Three. It does not assure quality care.

Four. It does not protect freedom of choice for parents requesting services for their children.

First in the area of economics, as I am sure all of you know, this bill created an entirely new bureaucracy only 6 months after Congress passed title XX. At the present time all 50 States are writing State plans to comply with the new title XX law and certainly in Michigan our Department of Social Services has worked very hard and spent a lot of time, money and effort writing their title XX plan that has to be submitted July 1. As you know, this plan has to be signed by the Governor.

If the committee would like to encourage the States to carry out the purposes of the Child and Family Services bill, I suggest as a first order of business that we raise the $2.5 billion ceiling on title XX and as a special incentive to the States more money could be allotted those States willing to commit more State money for child and family services.

There has been a lot of talk about the private sector profit and nonprofit and I will not go into it except to comment that I do wonder what will happen to the private sector.

What will happen to the investment the proprietary centers have made already? Are they going to be crowded out? Irving Kristol in last Friday's Wall Street Journal said:

> It (the Ford Administration) is trying to evolve a social policy which, while not abolishing the welfare state in the name of "free enterprise" (that would be absurd and suicidal), would reshape, delimit, and—above all—debureaucratize it . . . It is struggling to increase the capacity of the private sector for economic growth, so that various classes and interest groups will be encouraged to think more in terms of achievement, less in terms of redistribution.

If there is a crying need for more quality child care, perhaps the Congress could encourage, not discourage, the private sector to invest in providing these important human services.

In the area of leadership, who will provide the leadership for the prime sponsors or the Child and Family Services Councils in the States? The CETA program in Michigan uses prime sponsors, and it is not working very successfully. Perhaps the States who need the money and services most will do without because of lack of leadership.

Jule Sugarman has suggested that the agency at the State level whose personnel has the most zeal should be given priority in providing the services to young children. A State or locality must only follow a formula presented in the bill to become a prime sponsor; no administrative leadership, management capability, or zeal is necessary. Who, then, will provide the leadership to change Child and Family Services Councils if they accept medicare programs, or more importantly, who will design the initial programs?

Parents cannot request something that doesn't exist, and the greatest need in this infant industry is management skills. Administering a large child care center is a difficult task, and not enough people have had the opportunity to improve their skills in this vital area. Administrators of programs with proven track records are not asked for in this bill, only community and parent representatives for policy com-Councils if they accept medicare programs, or more importantly, who more properly may belong in the classroom.

The next area I talk about is quality. Where in this bill is the motivation to provide quality, excitement, instill values to be accountable? Where is the opportunity for the market to work? For bad programs to fail? William Raspberry writes in the Washington Post:

> But usually there is a no-fail quality to social welfare programs. That may make the basic human needs virtually automatic, but it also tends to stifle the natural drive toward superiority.
>
> What we need to do instead is to make it possible for the impoverished to earn their way into public housing or welfare grants or job-training opportunities—to give them some means of setting themselves apart on some other basis than their poverty.

Gwen Morgan and Joan Bergstrom discuss this issue also in a paper written for the Day Care and Child Development Council of America, Inc.

> If poverty is a criterion for participation in child development programs, the programs by definition will perpetuate poverty. A treatment view of child development programs will not support the robust health which we need to promote in the American family.
>
> Cross cultural studies of caregiving suggested the following common features of successful programs?
>
> 1. Successful programs assume the inevitability of a good outcome because they see themselves as working with essentially normal children in need of treatment.
> 2. They are strongly ideological, pressing in on their wards from all directions with clearly articulated and highly valued philosophical and ethical positions.
> 3. They assert the child's capability to make a contribution and require him to do so.
> 4. They provide clear examples of mature group membership.
> 5. They enjoy community support and esteem.
> 6. They provide an older child with a peer society that stands for adherence to adult values.
>
> In this post-Watergate era, it is appropriate to promote health and to affirm values as we seek to support the family.
>
> The Mondale bill as presently written does not reflect this philosophy.

In this bill, 65 percent of the funds must be reserved for services to economically disadvantaged children, the next priority on funds must be given to working mothers' children, or children of single parents. Finally, children from a range of socioeconomic backgrounds may be included to the extent feasible. Since it is more difficult, costly, and time-consuming to program for children from diverse socio-economic backgrounds, there is little incentive to make the program feasible.

Also, large day care centers have more opportunity to enroll a socio-economic mix, but larger centers are harder to administer and have an aura of institutionalizing to social workers unfamiliar with child development programs. For a child care program—and the people in it—not to be stereotyped, no restrictions should be placed on enrollment.

FREEDOM OF CHOICE

Parents should have the opportunity to choose a preschool program that fits their individual needs, whether it be a day care home on evenings or weekends, a day care center where they live or work, a small neighborhood group home, or an in-home babysitter. The State of Michigan allows its welfare parents the choice of care, but pays the provider of care directly. The rate paid to providers is determined annually by the Michigan Legislature. Parents can choose proprietary centers or nonprofit centers, proprietary homes, or in-home aides. Centers and homes must be certified and licensed to quality for title IV–A funds (title XX on October 1, 1975). In most of the Young World Centers, the percentage of private paying parents to welfare parents is about 50 percent. I doubt if most of our parents or children enrolled in the centers know who is paying for the care.

Our parents seem to prefer individual conferences with the director or teachers to group policy meetings—no matter what times the group meetings are scheduled. The reasons for this are many and varied. Most are single parents who do not want to take the time for meetings away from their children or other duties. They have high guilt levels—and making policy decisions places another burden on them, for they are often looking for guidance and don't want to admit that they don't know what policies they desire for the center. They are more interested in care and discipline than curriculum, probably because they don't have the relevant skills to make the program work at the policy level.

Parents certainly should distrust a Government policy that sets up a council by formula, because if they work their way off welfare, they also may have worked their way off the policymaking council. Quoting Raspberry again:

> You have to be a failure to get in, and you have to remain a failure to stay * *

Welfare parents should have the right to choose the day care center or home that provides the program and services they want, whether public or private, profit or nonprofit. For them and especially for their children, "if human equality has any pragmatic meaning, it is that people should have the opportunity to establish themselves as superior."

I would be happy to answer any questions.

Mr. BRADEMAS. Thank you very much, Miss Hatton.

Let me thank you for your very interesting statement. Let me ask the questions that go to the fundamentals of this bill.

First of all, do you think there is a need in the United States in the mid-1970's for the kinds of services which this bill would provide?

Miss HATTON. I certainly do. There is always a need for quality care. The question is how best can we accomplish it. There certainly is need. There is need in Michigan where I am familiar with the need and there is need all over the country.

Mr. BRADEMAS. What would be your estimate of the degree of need? Could you give us any statement on that—general or specific?

Miss HATTON. Having read quite a bit of the testimony, I think, in the last 12 or 13 sessions, there have been so many statistics put out as to need—last week someone said 23 million children were in need; someone else said 32 million. As to how this need will be taken care of, I think is the crux of the issue—not whether the need is 5 million, 10 million, 15 million, or 20 million.

Quality care, the need to improve in this country in any area, is always there. It is, how do we accomplish it, and can we, and what is the best way to do it?

Mr. BRADEMAS. Now, is it your position that the legislation under consideration ought not to be passed? Or it is your position that if passed, public funds should be used to subsidize profitmaking child care services as well as nonprofit child care services?

Miss HATTON. Yes. It is my view, Mr. Brademas, that the bill should not be passed. Having worked with what will now be title XX and having worked with title IV–A in Michigan, I feel we have done quite a successful job in bringing together both the private sector and the public as far as the funding goes. As you know, we get our money, as do the public centers, through not only money that goes to private proprietary, it also goes to the public schools, it goes to other people, and as far as I am concerned, that is a good way to continue.

If we want to worry about the need to go back to title XX, I don't think that the $2.5 billion is going to touch the need if they really want to carry it out in every State and plan that the State could put forth. In fact, I would say that the $2 billion that this particular bill is authorizing could be put right on the title XX right now as a starter in order to make it possible to work that way.

I also think that title IV and title XX have already set up a structure at the State and county level—and it is a governmental structure, not a private, not a prime sponsor type like you have. I think that from the Governor on down, these people have to be accountable. They are elected officials, and I do think it is a good way to go, which I think I brought up in my prepared statement. I objected to the fact that you have an entirely new bureaucracy that would be set up.

Mr. BRADEMAS. Now, you say there is a need. I believe you said in response to my earlier question that the $2.5 billion would not—I believe I accurately quote you—touch the need.

Miss HATTON. Yes.

Mr. BRADEMAS. That we should not pass this bill.

Miss HATTON. Yes.

Mr. BRADEMAS. I confess I have difficulty in logically and rationally relating those three different observations on your part. Now, I realize you may have been speaking metaphorically when you said $2.5 billion will not touch the need. I am thought of as a liberal, but I think $2.5 billion is a lot of money. You are suggesting it will not touch the need for child care services in this country. Can you elucidate that? I don't want to misrepresent you but I don't really understand that.

Miss HATTON. No; the $2.5 billion allows through the State plans which I also have in my prepared statement. If you go up to 115 percent of the median income in the State and allow more welfare people to have more money, if it is not completely paid for, let's say, up to 80 percent is completely paid for in a day care center or wherever they chose to send their children, and that is partially paid for after that, it will require a lot more money to allow a larger segment of population. Certainly the middle-income person with a lower-to-middle income is the one who I feel is not getting the quality care that they deserve mainly because they cannot afford it. In other words, they are just over the basic income level and these people are cut out the way it is set up right now.

Mr. BRADEMAS. If they are being cut out for the reasons you suggest, assuming for the moment that you are correct in that judgment, are you suggesting that if they cannot afford child care services in the present circumstance that they would be able to afford child care services provided by the profitmaking operators?

Miss HATTON. Well, what I was saying, I think, is something a little different. Whether the operator be private or public or nonprofit or for-profit, it is that at the moment it is only——

Mr. BRADEMAS. Profitmaking.

Miss HATTON. Profitmaking, all right.

Mr. BRADEMAS. My question is this: If they cannot afford child care services now, why should they be able to afford services provided by the profitmaking operators?

Miss HATTON. Well, I think in order to answer you, the way I interpreted your question before was that the group under 80 percent is paid for, and whether it is to the for-profit or nonprofit, at least in Michigan, it does not matter. I am saying under title XX, you go from 80 percent of the median income up to 115 percent which is the top amount allowed eligibility. This allows a group of people whose children are not being taken care of in title IV-A aid or welfare ADC—however you want to call it—and the group that is over, let's say, the 115 percent can afford to pay the for-profit centers.

In Michigan, by the way, the for-profit center or the nonprofit center gets the same amount of money up to the limit the legislature allows, and no more. So we have to charge what I will say the market will bear and we cannot charge any more because the State legislature won't pay us any more anyway.

So I am saying the group that is left out more specifically, we are allowed $6.26 a day for a welfare child. That is the top limit. A private paying parent might be able to afford the $6.26 a day. There is a group, let's say, between the 80 percent of the median income maybe up to 115 percent, maybe even higher than that, let's say. Whether or not they can afford it they don't think they can afford it and they therefore will not use the service and they will usually go, I will say, underground in the sense they will go to an unlicensed home, they will go to a neighbor's home. These maybe are the children that are on the streets because of the fact that they are caught in the area where, first of all, the Government won't pay and, second, they, themselves, don't have the money to pay. So to me whether it is for profit or nonprofit, whether it is part of the public school system or what-have-you does not matter about the parents' problem. The problem is they are caught in an economic bind.

Mr. **Brademas.** Is it your position, Miss Hatton—I want to be sure I understand it fairly—that fundamentally speaking the child care services in the legislation we are here discussing can be met by profitmaking operators?

Miss **Hatton.** I think it can be met by a combination. I really think all of them need to work together. I think my main criticism is that the private sector, let's say that the for-profit that has really provided the majority of child care in the past, all of a sudden in a somewhat cavalier manner is being left out of this bill and I am saying what is going to happen to this group. I certainly think they can all work together.

I think from my own experience of running for 12 years a nonprofit center and then for 6 years a group of for-profit that I think both can work very well and both can provide quality care, and I think that that is what needs to happen rather than our saying we are going to have it all here or we are going to have it all there.

I also think the public schools especially in the education area can make a contribution and probably will go down to I would say the 4- and 3-year-olds in a 2- or 3-hour-a-day program more so than full day care where the emphasis, let's say, is on education and less emphasis on care because when you get into the 10 hours a day and perhaps the changing of the diapers, I don't think that the public school in the past has really been very interested in providing this side of the care question.

Mr. **Brademas.** I just observe finally that your criticisms conjure up in my mind the same kinds of reservations that were expressed by a number of the doctor groups in the country when medicare was under consideration and how horrendous would be the impact on their incomes. You know, we really don't hear that very much any more. Doctors seem to be delighted by the effect of that intervention on the part of the Federal Government in our medical system.

Miss HATTON. Mr. Brademas, I was just going to say I think the emphasis ought to be on who provides good service and those are the people who should be used.

Mr. BRADEMAS. Thank you, Miss Hatton.

Senator Stafford.

Senator STAFFORD. Thank you, Mr. Chairman.

I have just two questions, Miss Hatton. After your very interesting statement in connection with your own current operation, Young World, Inc., do you have any parents who actually are participating in the programs with you?

Miss HATTON. Yes; in many different ways. We have some welfare mothers, for example, who come in during the noon hour, and the noon hour lunchtime is the particularly important time where you need more staff around, and they come in and help at that time and, by the way, are paid. We have people coming in the morning and afternoon as a matter of fact. I think perhaps in Michigan we have less of the stigma of work for profit—we are not going to volunteer and come in and help you—than maybe abounds in other parts of the country because, as I said, having read the testimony of many people they seem just up in arms about the fact that the for-profits do not do good things, provide quality care and all the other.

So; yes, we certainly have volunteers. We encourage them. By the way, any time of day or night—I don't know if this is true with other centers but we encourage anyone to come in any time. We put our reputation on the line. The fact, I guess, I am willing to come here and talk to you, and we have 10 centers with over 1,000 children being hopefully taken care of at 11:15, but this is being done.

Senator STAFFORD. Do you provide any services to the parents themselves?

Miss HATTON. Oh, we provide many services; yes. I can give you an example. Yesterday I received a letter about a problem child. The director of the center realized that the child was having a problem. The child was an ADC child. He contacted the parent, contacted the child care worker, contacted the public school and filled out the forms for the child. The clinic billed the cost of the form to the school and what-have-you and had conferences with the parent. The parent has in fact a very basic problem which is she does not want to admit that her child does have a problem.

Since this just happened yesterday morning, I think it shows you have to work with the parents.

Another thing, if the parents don't like the services we are providing, don't like our program, they can go other places. In all the cities that we are in from Muskegon to Detroit there happened to be other centers available and they do have slots.

Senator STAFFORD. Thank you very much.

Thank you, Mr. Chairman.

Mr. BRADEMAS. Mr. Beard.

Mr. BEARD. Miss Hatton, you make some pretty good points about the profit and non-profit working together. I think the most important point, whether it is a profit or nonprofit is on an even keel sanctioned, possibly licensed and I think that is the important fact.

Miss HATTON. Yes.

Mr. BEARD. Let me tell you about the process. This is the concept. H.R. 2966, before this bill gets to the main committee and to the floor there will be a markup session and during that markup session your testimony and all the testimonies today will be considered and the likelihood of the bill coming out exactly the way it is written is very, very slim. So your thoughts and everyone else's thoughts will be considered. The profit and nonprofit homes, the possibility of giving them equal treatment—all of that will be considered, so this is not the final version.

That is why testimony is so important, because it helps all of us. We are not experts in everything, it it not possible. You cannot be a jack-of-all-trades and master-of-none. Nobody wants to fall in that category. That is the importance of public testimony. You zero in on one area and we zero in on many areas, so don't you worry about a thing.

Miss HATTON. Thank you very much, Mr. Beard.

Mr. BRADEMAS. Mr. Cornell.

Mr. CORNELL. Thank you, Mr. Chairman.

I don't know whether I entirely agree with that.

You mentioned about the licensing in the State of Michigan of child care centers. Could you tell me, is there an ongoing inspection? What is the nature of that?

Miss HATTON. Yes; there is. I think probably in Michigan—again having been here before, Mr. Cornell, and listening to someone say I think in Florida not only this morning but at another time they didn't have much licensing or perhaps maybe not much enforcement of licensing standards—I think that we have good standards in Michigan; in fact, they are quite strict; perhaps more so than frankly any of the other States. I do think that it is enforced also.

We have our State department of social services in charge of licensing, and it is also in charge of what we call payment policies, because of the fact that we do get so much money through title IV-A through this department. They divided the licensing and the payments into two separate areas so that the licenser can come around and do or say whatever she wants; it has nothing to do with Federal or State payments of funds, and that is for profits and nonprofits. We have to be licensed every year, although now I understand it is going to skip to every 2 years. The licenser comes around first of all when there is a complaint, so she could come every week, or if not she usually comes around about every 2 months.

Mr. CORNELL. Do you consider the enforcement of the standards by the State officials to be uniform, whether it happens to be publicly owned or nonprofit or profitmaking?

Miss HATTON. I think relatively speaking and as best as can be expected, because we are all human, that they are uniform. I can say that one of the licensers in the Grand Rapids area has worked with me since 1957, and gee, we have no problems getting along after that many years. There are new licensers in other areas that I think are strict about things that to me should not be emphasized as much as they do and this sort of thing, but I think in general they go through and do a good job of enforcing the standards.

Mr. Cornell. One last question in regard to your Young World, Inc.

What type of services do you provide for the children in your child centers? I mean, in a very general way.

Miss Hatton. All right. In very general terms, we——

Mr. Cornell. Medical.

Miss Hatton. All right. Let me start with the day, and then I will go to the medical just very quickly.

We provide services 5 days a week, and in two of the centers, 6 days a week from 6:30 until some, 11 at night, some until just 6 o'clock at night. We provide before school care, afterschool care, kindergarten even, full nursery school.

We provide transportation not only both ways, but by the way, the State legislature does provide a certain amount of money for transportation. We transport children to school, from school, to the child guidance clinic and back. By the way, we aren't paid at all for that, and often it is the ADC child that we are taking care of. We do think that the child guidance clinic, at least their staff, is paid more than the $2 minimum wage that unfortunately much of our staff gets.

We work with the parents as far as the health. Specifically in the health care, we take our ADC children to the hospitals where the clinics are, if necessary, to get the health forms filled out. In Michigan, in many of our areas they will not pay us—this is the State of Michigan—unless the health form is filled out on both sides. We do use the EPS and DTS—early pediatric screening and diagnostic treating centers—in the various cities where they have gotten themselves organized. Some areas obviously do a better job of that than others do. We have to provide for this, and there are many agencies that we can work and do this. When you are working with as many welfare children as we do, I think you get to know the agencies, what they can provide and what they can't. For example, in the child guidance clinic, the child I was talking about yesterday had to be put on a waiting list to be taken care of.

Mr. Cornell. I understand from your testimony that you said they now pay $6.85.

Miss Hatton. No; it is $6.26, and it will go up to a 7-percent increase which was indicated by the legislature, which means it will go up to $6.70 per day, and then they allow at the moment another dollar for transportation, so that is $7.70 a day. That is paid to for-profit and nonprofit and so on.

Mr. Cornell. Have you any idea of what percentage of the welfare children are taken care of in profit child care centers?

Miss Hatton. I do know that I take care of—and obviously, not me personally but my company takes care of about 10 percent of the welfare children in Michigan that are in centers. There are about 8,000 children in centers, and we take care of about 800 of them. There are 16,000 children taken care of in day care homes or by an in-home aide, and obviously a day care home would be a "for-profit" or for proprietary setup, for the simple reason I don't think they would bother to go through the legal problem of becoming nonprofit.

Mr. Cornell. And the decision of where, in what day care center the children will be placed, is made by the welfare authorities to the parents?

Miss **Hatton**. Right. The parent is given the opportunity to put the child in essentially one of three areas—in a day care home, in a day care center or find themselves an in-home aide, essentially a a babysitter which the State then pays. So there are three different areas, and they can choose. I do think that they get guidance depending on the day care worker.

For example, they probably get guidance into one of the three. Many times by the day care workers' attitude toward maybe the centers in the area, the homes that are available and also the age of the child, it is a real problem because under 2½—and there is obviously a lot of care that is necessary under 2½—it is not provided for as long as licensing goes in the State of Michigan in a way that allows the centers to operate. You just cannot be licensed under 2½ except with special contract with the State, so most of the children under 2½ are taken care of in home situations.

Mr. **Cornell**. But the final decision is left with the parent?

Miss **Hatton**. It must be by law; yes.

Mr. **Cornell**. Thank you, Mr. Chairman.

Mr. **Brademas**. Mr. Hall.

Mr. **Hall**. I apologize for missing most of your testimony, and you may have touched on this. Did you say anything about the ratio of the child to staff or teacher?

Miss **Hatton**. Yes. We have to follow the Federal interagency ratios which, by the way, as I said, we have children from 2½ on up to about the age of 12. For children 2½ to 4, 5 children to 1 adult in groups of 15. You have to have two paid staff to one volunteer in that ratio setup.

From age 4 and 5, the ratios 1 to 7, and again the group size has to be limited to 20 in one group, and again you can have 1 volunteer to 2 staff members.

Then I think over 6, because of the fact that they allow larger ratios and we don't bother with it too much, it goes 1 to 10 and maybe up to 15, more than that.

Mr. **Hall**. Could you say anything about your relationship to or feedback from the public school officials or even the university. Do you have any connection with them at all or relationship?

Miss **Hatton**. Last year, we had a program with Michigan State University; they had a HEW grant to study socio-economic mix, and the reason they picked four of our centers is that they had the kind of socio-economic mix that they desired, so we worked with them for an entire year in that program. We are working with them right now in the area, and they are doing psychological studies at a couple of the centers. In most of the cities, our centers are larger, maybe twice as large as the next center down, and when you are looking—which many of them are when they are doing this kind of research—it is hard if you have just a small neighborhood center.

I don't know if I touched on it in my testimony, but if you have just a small neighborhood center, you don't have the opportunity to have the kind of mix that I think many people desire certainly when we talk about segregation in schools.

Mr. **Hall**. Thank you.

Mr. Brademas, I have no further questions.

Mr. **Brademas**. Thank you very much. Thank you, Miss Hatton.

Miss **Hatton**. Thank you.

[The prepared statement of Miss Hatton follows:]

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CHILD CARE
FACILITIES

June 20, 1975
Testimony of Joyce V. Hatton

Mr. Chairman and Members of the Sub-committee on Children and Youth and the Sub-committee on Select Education.

I am pleased to have the opportunity to testify on the Child and Family Services Bill, H. R. 2966. I applaud the continuing interest in the welfare of young children of the House and Senate Sub-committees and know that, if we differ in the means we think necessary to accomplish the purposes of this bill, we both have the same goal of providing quality child and family services.

Although I have been in the nursery school and day care business since 1957, only recently has day care become well known to the general public.

My company, Young World, Inc., owns and operates ten child development centers in six major Michigan cities. The company provides education and day care for children between the ages of 2 1/2 and 12 years. Each center is licensed to accommodate approximately 100 full time children. Half of the 1,600 enrollees are children of welfare families, making Young World the largest private operator serving economically disadvantaged children in the United States.

During 1974, two new $300,000 child care facilities were built in Flint and Westland (a Detroit suburb), introducing a new concept for day care centers: indoor swimming pools specifically designed to facilitate teaching infants and preschoolers how to swim.

Prior to 1969, when I joined a publicly held child care company, I owned for twelve years a non-profit nursery school for one hundred children, volunteering my time as administrator, and using parents as aides on a rotating basis throughout the school year. I have five children, three now in college, all of whom were enrolled for a two year period in one of my nursery schools.

In 1969, while working in modular housing, I was hired as a consultant to design modular day care centers. Six modular centers have been built in Michigan, one on the Michigan State University campus.

At present, I serve on the State Advisory Committee for Day Care to the Michigan Department of Social Services, the State Ad Hoc Committee for Child Care Center Rules, and a Michigan Department of Education Referent Committee.

Mr. Chairman, I have been told this is the final day of joint Senate House hearings on the Child and Family Services bill. I hesitate to be critical of the bill because of the tremendous effort and concern that has been shown for helping young children by your committee members and your staff. Also, I know citizens from all parts of the country have contributed their ideas and suggestions to your committee--people who are anxious that quality child care be provided whenever and wherever it is needed. But this is a very complex issue, and I would not be honest with you if I told you I thought this bill, as presently written, will accomplish its purposes. My reasons are:

1) It does not make economic sense for the public or private sector
2) It does not provide leadership
3) It does not assure quality care
4) It does not protect freedom of choice for parents requesting services for their children.

(1) Economics. This bill creates an entirely new bureaucracy only six months after Congress passed the Title XX Amendment to the Social Security Act (PL 93-647). The Child and Family Service bill authorizes for "training planning and technical assistance" $350 million during 1976 and 1977. Authorized for administrative costs is 5% of $1 billion, or an average of $1 million per state.

At the present time all fifty states are writing state plans to comply with the new Title XX law. Title XX redefines the state's role in providing social services to families, children, the aged, blind, etc. Within the broad constraints set by the federal government specifying goals and client eligibility, the states may determine what services they will provide, what agencies and programs they will fund, and what client groups they will serve. Every state -- if it so desires -- can conceivably fund its entire allotment under the $2.5 billion ceiling.

I know the State of Michigan's Department of Social Services has spent much time, money and effort writing their Title XX plan that must be submitted July 1, 1975. If the state increased the eligibility for services to the maximum allowed, which is 115% of the median income in the state ($15,302 is Michigan's median income for a family of four, $17,597 is 115% of that), it would need much more money than it is alloted under the $2.5 billion ceiling.

If this committee wants to encourage the states to carry out the purposes of the Child and Family Services bill, I suggest as a first order of business to raise the $2.5 billion ceiling on Title XX. And as a special incentive to the states, more money could be alloted those states willing to commit more state money for child and family services.

The private sector of child care providers is frustrated and confused over the wording in this bill. James Gannon wrote in the Wall Street Journal, "It's only common sense, after all, to know that the economy can't possibly maintain a stable economic course when economic policy is so unstable." Why should the private sector want to risk investing in new child care centers if, to quote one of your staff committee members, they must be "slightly better than a non-profit" to qualify as a project applicant? (--and a non- profit that might be built with federal loans or outright grants?)

"Non-profits" wear the halo and have many benefits the "for-profits" do not, ~~many~~ courtesy of the federal government. For example, non-profit centers are reimbursed in cash for food by the U. S. Department of Agriculture; if my company were non-profit, the cash food supplement would amount to about $150,000 per year. (That is alot of salaries and equipment my staff has to do without.) Even the U. S. postal system contributes taxpayer's money; it costs a non-profit operation 1/3 as much to mail their letters as a for-profit one.

"Non-profits" are looked upon with favor by the press, radio and TV - "for-profits" are commercial and making money off of kids (no soliciting allowed). Foundation funds, HEW research grants, Model Cities programs, intern training programs with schools and colleges, community volunteers--all are available to the "non-profits". The "for-profits" can find their own volunteers (they do have them) and provide their own training programs.

What will happen to the investment the proprietary centers have made already? Are they going to be crowded out? Irving Kristol in last Friday's Wall St. Journal said, "It (the Ford Administration) is trying to evolve a social policy which, while not abolishing the welfare state in the name of "free enterprise" (that would be absurd and suicidal), would reshape, delimit, and--above all--debureaucratize it... It is struggling to increase the capacity of the private sector for economic growth, so that various classes and interest groups will be encouraged to think more in terms of achievement, less in terms of redistribution." If there is a crying need for more quality child care, perhaps the Congress could encourage, not discourage, the private sector to invest in providing these important human services.

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Testimony of Joyce V. Hatton

(2) Leadership. Who will provide the leadership for the prime sponsors or the Child and Family Services Councils in the states? The CETA program in Michigan uses prime sponsors, and it is not working very successfully. Perhaps the states who need the money and services most will do without because of lack of leadership.

Jules Sugarman has suggested that the agency at the state level whose personnel "has the most zeal" should be given priority in providing the services to young children. A state or locality must only follow a formula presented in the bill to become a prime sponsor; no administrative leadership, management capability, or "zeal" is necessary. Who, then, will provide the leadership to change Child and Family Services Councils if they accept mediocre programs, or more importantly, who will design the initial programs?

Parents cannot request something that doesn't exist, and the greatest need in this "infant" industry is management skills. Administering a large child care center is a difficult task, and not enough people have had the opportunity to improve their skills in this vital area. Administrators of programs with proven track records are not asked for in this bill, only community and parent representatives for policy committees and local program councils, and a child care specialist who more properly may belong in the classroom.

(3) Quality. Where in this bill is the motivation to provide quality, excitement, instill values to be accountable? Where is the opportunity for the market to work? For bad programs to fail? William Raspberry writes in the Washington Post, "But usually there is a no-fail quality to social welfare programs. That may make the basic human needs virtually automatic, but it also tends to stifle the natural drive toward superiority. What we need to do instead is to make it possible for the impoverished to earn their way into public housing or welfare grants or job-training opportunities--to give them some means of setting themselves apart on some other basis than their poverty."

Gwen Morgan and Joan Bergstrom discuss this issue also in a paper written for the Day Care and Child Development Council of America, Inc.:

"If poverty is a criterion for participation in child development programs, the programs by definition will perpetuate poverty. A treatment view of child development programs will not support the robust health which we need to promote in the American family.

"Cross cultural studies of caregiving suggested the following common features of successful programs:

1. Successful programs assume the inevitability of a good outcome because they see themselves as working with essentially normal children in need of treatment.
2. They are strongly ideological, pressing in on their wards from all directions with clearly articulated and highly valued philosophical and ethical positions.
3. They assert the child's capability to make a contribution and require him to do so.
4. They provide clear examples of mature group membership.
5. They enjoy community support and esteem.
6. They provide an older child with a peer society that stands for adherence to adult values.

In this post-Watergate era, it is appropriate to promote health and to affirm values as we seek to support the family.

The Mondale bill as presently written does not reflect this philosophy."

In this bill, 65% of the funds must be reserved for services to economically disadvantaged children, and next priority on funds must be given to working mothers' children, or children of single parents. Finally, children from a range of socioeconomic backgrounds may be included "to the extent feasible". Since it is more difficult, costly, and time-consuming to program for children from diverse socioeconomic backgrounds, there is little incentive to make the program "feasible".

Also, larger day care centers have more opportunity to enroll a socioeconomic mix, but larger centers are harder to administer and have an aura of institutionalizing to social workers unfamiliar with child development programs. For a child care program--and the people in it--not to be sterotyped, no restrictions should be placed on enrollment.

(4) Freedom of Choice. Parents should have the opportunity to choose a preschool program that fits their individual needs, whether it be a day care home on evenings and weekends, a day care center where they live or work, a small neighborhood group home, or an in-home babysitter. The State of Michigan allows its welfare parents the choice of care, but pays the provider of care directly. The rate paid to providers is determined annually by the Michigan Legislature. Parents can choose proprietary centers or non-profit centers, proprietary homes, or in-home aides. Centers and homes must be certified and licensed to qualify for Title IV A funds (Title XX on October 1, 1975). In most of the Young World Centers, the percentage of private paying parents to welfare parents is about 50%. I doubt if most of our parents or children enrolled in the centers know who is paying for the care.

Our parents seem to prefer individual conferences with the director or teachers to group policy meetings--no matter what times the group meetings are scheduled. The reasons for this are many and varied. Most are single parents who do not want to take the time for meetings away from their children or other duties. They have high guilt levels--and making policy decisions places another burden on them, for they are often looking for guidance and don't want to admit they don't know what policies they desire for the center. They are more interested in care and discipline than curriculum, probably because they don't have the relevant skills to make the program work at the policy level.

Parents certainly should distrust a governmental policy that sets up a council by formula--because if they work their way off welfare, they also may have worked their way off the policy making council! Quoting Raspberry again, "You have to be a failure to get in, and you have to remain a failure to stay...."

Welfare parents should have the right to choose the day care center or home that provides the program and services they want, whether public or private, profit or non-profit. For them and especially for their children, "if human equality has any pragmatic meaning, it is that people should have the opportunity to establish themselves as superior." (Raspberry)

Mr. Brademas. Next we shall hear from Prof. Robert Mendelsohn of the Department of Preventive Medicine, University of Illinois.

Dr. Mendelsohn, we are happy to have you.

Again, sir, if you would be kind enough to try to summarize your statement, we will put it in its entirety in the record at the conclusion of your testimony.

STATEMENT OF ROBERT S. MENDELSOHN, M.D., ASSOCIATE PROFESSOR, DEPARTMENT OF PREVENTIVE MEDICINE, UNIVERSITY OF ILLINOIS, ALSO ASSISTANT TO THE EXECUTIVE VICE PRESIDENT, MICHAEL REESE HOSPITAL, CHICAGO, ILL.

Dr. Mendelsohn. Thank you very much, Mr. Chairman.

At the outset, I might say that I do not intend to read my statement, and I am very grateful to this committee for giving me the opportunity to come to try to influence them. As it will be developed, I come here not completely as a willing witness.

I would like to use a few of the precious moments of my time to take the opportunity, since this is a goal that deals with children and families, to introduce to the committee some members of my family who I brought along with me.

That young girl on the right with the glasses is my daughter, Ruth Mendelsohn.

The lady in the yellow is my sister-in-law, Roana.

Behind her is my brother Allen Mendelsohn, a prominent attorney in Washington.

The young fellow here between the two ladies is my nephew, Martin, who just paced off this room and found out it measures 74 by 46 in case anybody wants to know.

Just next to my brother, Allen, is Mark Rothenberg who comes from Minneapolis and this year is a summer intern to Congressman Fraser.

Mr. Brademas. Glad to have you all here. You already have us outnumbered.

Dr. Mendelsohn. Well, I hope that helps because in a sense I think that that is the issue here today, the outnumbering of one group by another.

Let me just walk you through my testimony. In the first place, I represent no organization and no group, and responsibility for my statements is exclusively and totally mine. The request for my testimony was initiated by your committee, and I did not apply to testify.

The first page of my testimony gives a history of my involvement and my deep appreciation to Senator Mondale and to Congressman Perkins for the excellent opportunities they have given me in past appearances before congressional committees.

The second page indicates that when I was first called by Mr. Agee, the counsel to your committee, I recollected to him that some years ago a draft of this legislation was presented to me for my remarks, but that since then I have had a number of reservations develop. I have the greatest respect for you, Congressman Brademas, and for every member of this committee and for the sponsors of this legislation. I was very concerned that my testimony might in some way endanger the passage of this bill, and therefore I was reluctant to testify.

Well, Mr. Agee told me that the intent of your committee was to determine the truth, and that gave me some encouragement, but since I have become a little skeptical about Government—unlike the rest of the population, I am sure—I asked Mr. Agee if he would check with you and with Senator Mondale to see whether they really wanted to hear what I have to say. He returned to me with the answer that they did. Since this presents a very welcome contrast to the ever-deepening crisis of confidence in our governmental institutions, I am very happy to be here today, and I accept this responsibility with a feeling of optimism that my views can influence the committee's future actions.

The third page lists my qualifications, and I will not further detail them.

At the bottom of the page, there is a list of my lack of qualifications. I would like to point out that I have never been enrolled in a day care center; my children have never been in day care centers. When I have grandchildren, that they will never have been in day care centers.

I don't know how many members of this committee have ever been in day care centers, but I would guess that the answer is very few, if any. Therefore, my entire experience is secondhand.

Mr. BRADEMAS. Let me interrupt at that point to assure you, sir, that I have been in quite a few.

Dr. MENDELSOHN. Maybe I don't make myself clear. I have been in quite a few, too, but never as an enrollee, Congressman. I hope I am making myself clear in that.

Mr. BRADEMAS. Not really. You know in all candor I have never assumed that it is necessary for a Member of Congress, for example, to be a lawyer in order to write laws; otherwise I should not be occupying the position I do. Nor do I assume that a Member of Congress has to be an authority on every subject on which, as a representative of democracy, he is called upon to pass some intelligent judgment. So I hope, sir, that you aren't suggesting that we go back to the days of the philosopher kings of Plato's republic. That may be all right in another kind of society but not in a representative democracy.

Maybe we are just quibbling about meaningless matters here, but I don't really understand your point.

Dr. MENDELSOHN. Let me try and elaborate. As a physician if I am dealing with the issue of child birth, I would say that the primary expert on child birth would be women who have given birth to children and the secondary experts would be the physicians or others who have attended the birth.

Mr. BRADEMAS. Of course no one could quarrel with you, but does that mean you suggest that only women who have given birth to children should have judgments on legislation which may affect the lives of children? That would be perhaps an interesting philosophical concept but I don't think seriously you want us to try to operate in a society of 220 million people that way.

Mr. BEARD. Would the chairman yield?

Mr. BRADEMAS. I don't want to take up all our time on this point, Doctor, and maybe we are doing so. You lean very heavily on this point and I am not sure that it is all that useful. Maybe we are just engaging in philosophical quibbling here.

Dr. Mendelsohn. No; I think I regard it as important because I have a feeling that the way that we were raised as pre-school-aged children to a great extent determines our views and our behavior in latter life.

Mr. Brademas. No question about that.

Dr. Mendelsohn. Therefore, I would contend that if we were raised at home by our own mothers, fathers, grandparents and aunts, uncles and cousins that we end up having different views in later life than if we were raised in day care centers where our activities and our meals were supervised by people other than our families.

Mr. Brademas. That is a hypothesis for which as a scientist you would, I should have thought, want to see the evidence.

Dr. Mendelsohn. As long as you mentioned Plato, I might mention I might agree that I also don't want to go to Plato's society because in his republic he recommends that children at the earliest possible age be separated from their parents and be put into special schools where they will be raised by the philosopher kings who are their representatives. I would agree with you——

Mr. Brademas. We are in total agreement in that area.

Dr. Mendelsohn. Right.

Shall I continue?

Mr. Brademas. Mr. Beard, do you want to make a comment?

Mr. Beard. The only comment I wanted to make is that some people in this country have the impression that unless you are a lawyer you should not be here. That you have to be a lawyer, big businessman, a millionaire, or very wealthy person to go in the Congress.

Well, let me tell you something, in 35 years in Rhode Island's second district we have had three congressmen: Two of us had working backgrounds. John Fogarty was here 27 years and made a tremendous contribution to health. He was a bricklayer.

I have been here 6 months. I was a painter a year ago. I drafted a bill in the Rhode Island General Assembly second to none in this country in the nursing home field.

Mr. Brademas. Mr. Beard has made my point far more eloquently than I can.

Go ahead Doctor.

Dr. Mendelsohn. Maybe I am fighting a lost cause. Let me try at least one more sentence because I think we are in agreement or at least let me state my case and then you can tell me if we are not.

I would agree that medicine is too important to be left to physicians and that law is too important to be left to lawyers and that day care is too important to be left to professional experts. As I intend to develop in my testimony, my concern and my fear is that the present legislation places too much power in the hands of the professional.

Page 4 of my testimony——

Mr. Brademas. That I can understand. Now, I feel that I understand that point.

Go ahead.

Dr. Mendelsohn. Thank you very much.

I might say that for example in pediatrics which is the specialty in which I hold credentials, always I feel that pediatricians have been far too influential in the field of the feeding of young children because pediatricians have been to a major extent responsible for the trend over the last 30 years in our country to switch from breast feeding to bottle feeding since they have assured mothers that bottled milk is just as good as breast milk, so that is why I give that as an example as to how professionals can interfere with family life. That is going to be the crux of my testimony, that professionals indeed represent a threat to family life and that the overriding danger of this kind of legislation is that it represents a transfer of power from the family to professionals. I intend to end with recommendations for how this bill can be amended to correct that change which I regard as unfavorable—that change in balance of power.

Page 4 begins with a summary of my position, and I might give it in one sentence.

> **While the stated intent of the bill is to strengthen families, the reality may be to weaken them. While the image is that of greater parent participation in their childrens' lives, the outcome may be that of further parent exclusion.**

I attempted in this summary to give evidence which is backed up by references in the literature to the concept that the so-called helping professional—social workers, teachers, obstetricians, pediatricians, psychiatrists, psychologists, educators and nurses—represents inherently and in practice a threat to family relationships.

On page 5 I further expand on that position. There is a section entitled "Is My Testimony Unique?" in order to indicate that I am not unique in this position, even though I was told by your counsel that nobody so far had really stated the way I am stating this particular position. I bring evidence from Andrew Billingsley, vice president for academic affairs of Howard University and also evidence from Thomas Fagan, director of the school psychology program, Western Illinois University, who are both very concerned that as professionals we have been placed in the position of protecting children from their own parents.

I also have some examples of the problems we have with words. Just a few years ago when marihuana existed in the inner-city it was called "weed" and now that it is in the suburbs it has been upgraded to "grass" because who wants weeds in our front lawn. Certain kinds of people used to be called "promiscuous" but today in medical literature they are called "sexually active."

One of the problems I have with this bill is that "poor" has now become "economically disadvantaged" and the words "services" and "quality" which were once good words in my opinion have now become pejorative.

I refer to the book "Beyond the Best Interests of the Child" by three famous or prominent psychiatrists who are trying to make a distinction between biologic and psychologic parenting. This has particular application to me personally in view of the fact that when Dutch Jews had to go to the concentration camps they left their children behind with Dutch gentile families. When the Dutch Jews returned in the later 1940's to reclaim their children, the gentile parents refused to give the children up in some cases on the grounds that the best interest of the child would be served by leaving them in their present environment.

The case finally went through all the Dutch courts and the children were returned to the Jewish parents.

Anna Freud and her co-workers now advise that this was an incorrect decision and the children should have been in many cases left with the gentile families.

I further try to establish how the professionals relate to the families—the nurse tends to assume the role of mother, the social worker that of big brother or sister, the physician tends to displace the grandmother with her traditional home remedies, the teacher takes the place of mother or father, and the oldest professional of all tries to replace the wife. Indeed, it is no accident that prostitution is included not in the category of a business but among the professions. For a business transaction there is an exchange of money or commodities, but in a professional transaction the professional gives of himself in return for a fee.

I suggest that it would be good for all of us helping professionals to remember what our historical roots really are. According to this view, a viable society consists of many strong families and few weak professionals. The growth of a powerful class of helping professionals poses a dangerous threat to society. Our own American history shows the major growth of our country occurring in an era of strong families, few teachers and doctors, and almost no social workers and psychologists.

I mention my unattainable idea which is in one sentence, to make motherhood an occupation so that mothers would get paid for being mothers and then we would see how many really want to go out and work. But since that is unattainable I go to my practical recommendations and that is on page 10. My recommendations for modification of this legislation are as follow:

Number one, I would recommend that section 105 be amended. Instead of "not less than half of the members of the council shall be parents of children served in programs," I recommend it read "All members of the council shall be parents of children served in programs."

Furthermore, other parent policy and parent advisory committees should be limited to parents; professionals and representatives of private agencies and organizations in this field may serve in an ex officio capacity but shall not have the right to vote or hold office.

I am interested in placing the entire control of this program in the hands of the parents. I say this on the basis of my extensive experience both nationally and locally in Head Start where I have watched when warrant councils have been effective and when they have been detrimental, and also with sadness over the years I have watched the Head Start program deteriorate from its original concept into a day care program.

My second recommendation at the bottom of page 10 is to amend section 504(a) which states in part:

> Nothing in this act shall be construed or applied in such a manner as to infringe upon or usurp the moral and legal rights and responsibilities of parents or guardians with respect to the moral, mental, emotional, physical or other development of their children.

This statement, without any enforcement mechanisms, is little more than a pious gesture. In order that it be converted from prayer to reality, I recommend the creation of a special "Office of Parents' Rights" to be headed by a lawyer with special experience and expertise in defending the rights of parents against public and private bureaucracies. I am aware, and I am sure the committee is, that there is a supply of such lawyers, particularly in pro bono locations, and I can go so far as to mention an example of such a lawyer—Pat Murphy from our own State of Illinois who is running for Attorney General on the Democratic ticket.

My predictions are that this act will pass. The reason I say this is not only because of its inherent value but also because it offers jobs and money to teachers, social workers, doctors, dentists, educators, psychologists, the television industry, and the construction industry. This combination of interests should suffice to overcome any opposition.

However, I am concerned that this act in its present form stands an excellent chance of resulting in the exact opposite of its intent; that is, it may well weaken rather than strengthen families. Indeed, it is my prediction that this will be the result and that we will see further evidence of family deterioration as measured by the indicia of rates of divorce, delinquency, school failure, ill health, mental illness, nursing home placements, and suicide.

Finally, my conclusions: My two recommendations—first, to to guarantee not 50 percent but 100 percent control by parents, and second, to provide a legal enforcement mechanism for the rights of parents—will, in my opinion, greatly increase the capability of the act to achieve its stated goals. If these amendments become part of this act, I can then enthusiastically support its passage and further am prepared to offer, if called upon, all resources at my command to assist in its implementation.

I am convinced that the act will then be able to provide the first step in turning our country toward a family oriented public policy and will lead our American families toward that biblically promised age when, according to the prophet Malachi, "He shall turn the heart of the fathers to the children and the heart of the children to their fathers."

I wish to express my deep appreciation for this opportunity to organize and present my thoughts before the finest forum in the world—the U.S. Congress.

Thank you very much.

Mr. Brademas. Thank you very much, Dr. Mendelsohn.

At the outset let me express my own appreciation to you for your candor and for the obvious concern that has brought you here today for what I regard as a most fascinating and a most interesting statement.

Let me ask you just two or three questions, sir. In your statement you make an observation which I think is, as you have already suggested, crucial to your whole point of view here. You assert that the helping professional represents inherently and in practice a threat to family relationships and you go on to say, and I quote your own statement:

> The so-called helping professional may give the image of a family friend, but in reality he is the enemy of the family. Therefore, any action that increases the power of the professional (and his minions of para-professionals) automatically lessens the strength of the family.

Well, now, I was brought up as a political scientist and I would like to make distinctions between descriptive observation and normative observation and I think you would not disagree that words like "threat" and "so-called" and "give the image" and "enemy" and "minions" are all somewhat, shall I say, loaded words. As I noted, you asserted that the helping professional is the enemy of the family and then you just went on to build your case on the strength of that assertion.

I put this to you, Dr. Mendelsohn, as you are a scientist by training and I am quite open-minded to hearing your evidence. You give us no evidence in support of your assertion. Now, I am sure that you can say, Well, I am a doctor and you are not—at least I am not your kind of a medical doctor—and therefore I know more about it than you do. I hope, however, that you would elaborate somewhat beyond that kind of response.

Now, I turn you in like fashion to page 6 of your statement in which you quote a psychologist from Western Illinois University and you give one sentence of a book that he wrote, published a year ago, and in his sentence he declares that: "What I sense, and I hope I am wrong, is a belief that as professionals we are in some manner duty-bound to protect children from their parents." On the strength of that one sentence you then say thus the child advocate becomes the advocate against the parent.

Now, I must say I don't regard that as very compelling evidence for your going on to that extraordinarily sweeping conclusion. So what I miss, Dr. Mendelsohn, in your statement, is some evidence. Is that a fair question?

Dr. MENDELSOHN. Yes. As a matter of fact, I would say extraordinarily sweeping generalizations.

Let me say at the outset, Congressman Brademas, that I regard this as a very difficult forum for me to present these views because obviously they strike a new chord. They are admittedly controversial and provocative. I was informed in my letter and over the phone that I had 5 minutes in which to make my statement, and I know I already exceeded that 5 minutes.

Mr. BRADEMAS. That is all right. Don't worry about that.

Dr. MENDELSOHN. Nevertheless, in spite of the difficulties in this kind of forum, I would still like to elaborate on some of this because obviously I have taken many statements out of context and it would take many, many hours for us to reach what I think is agreement because my guess is that you and I agree on this if we really sit down and talk about it and that there is a way to do these things.

Mr. BRADEMAS. Let me just interject if it is helpful to you, Dr. Mendelsohn, that you, yourself, have indicated that you have undergone a radical change in your outlook. My own reading as a practicing politician is that something happened to you on the way to the hospital one day that upset you terribly and you must have been very annoyed by some helping professional to have come to these conclusions. I am just trying to understand the nature of the light on the Damascus Road, that is all.

Dr. MENDELSOHN. Yes. I am glad you put it that way because you gave me the opportunity to leave my testimony in the way that I had planned which was to talk about myself and my own development and see whether that is relevant to this particular concern before us.

I began as a traditional pediatrician, very conventional, doing all the appropriate things in science and as a matter of fact believing in science because at one time I really believed that there was a certain amount of objectivity. Now, since then, I, together with many others, have learned better and I know now that if one uses science and statistics you can prove almost any side of any question. All of us know some of the very famous references that are used in the field of statistics.

I am trying to think of a book which won't come to me right now. However, one of the famous stories is that of the statistician who has to travel once a month from New York to California and he always takes the train because he has figured out the statistical likelihood of there being a bomb on the plane and there is a statistical significance of that occurring. One day his good friend sees him at La Guardia Field and says, "What are you doing here?" And the statistician says he has recalculated the possibilities and this time he has figured out the chance of there being two bombs on the same plane and that is such a remote possibility that it is not even worth considering so now he carries his own bomb.

The stories of that nature are uniform and I and many others have learned to have a healthy skepticism for science and for statistics and for documentation.

Now, I will admit at the outset that the kind of opinions that I have given you and the kind of hard data, if you like, that I could use to back up these statistics could be countered on the other side by equally hard data. In other words, in science in most cases, particularly science that deals with behavior and biology you can prove almost any side of any question.

Mr. Brademas. Doctor, I must interject. That observation could be taken—and I don't say this in any pejorative sense whatsoever—as a kind of prescription for know nothingism. We might as well talk to nobody, ask nobody anything on anything because you of course have your statistics, and I will bring in my statistics. But that is why we have forums. That is why we want you here.

Dr. Mendelsohn. Well, let me tell you my thinking on that. I think that there are two ways to approach an issue. One is using what I call horizontal evidence. Now, horizontal evidence is statistical, contemporary, scientific. The other is using longitudinal evidence. Longitudinal evidence is historical rather than contemporary, traditional rather than scientific.

Now, I think it is important to use both of those lines of evidence and see if they are congruous or if they conflict. I would say that if you want to put it in one word, contemporary evidence is expertise. Historical evidence results in wisdom.

Now, what I am trying to say is that it is possible for us to deal in the field of wisdom in addition to dealing with the field of expertise.

Mr. Brademas. Nobody would quarrel with that but I certainly hope you are not suggesting that what I knew last week is more true than what I learned today by definition. You are not imposing a chronological based standard on truth, are you?

Dr. Mendelsohn. What I would propose is that in many of these fields the untutored farmer knows as much as the biggest professor in the medical school. Now, I say that at the risk of endangering the fallacy of my own testimony since at the outset I tried to establish my credentials. I would like to tell you what happened to me.

Mr. **Brademas**. That would be helpful. That is what I don't understand.

Dr. **Mendelsohn**. As a conventional pediatrician with an office practice on North Michigan Avenue in Chicago, I got involved with the Head Start movement and watched a high degree of success in providing services. The net result which was shown by almost every study—and I am not limiting myself to the Westinghouse Study—the net result of the Head Start medical and dental program of providing all the services to children as they reached third and fourth grades were not better off medically as compared with the group of children who had never been through Head Start and had never received services. Now, this meant that I, as a national director of the Medical Consultation Service, had to rethink the entire program.

Now, that led me to rethink much of my own professional background. I have included a reprint of mine called "Parent" in which I point out that obstetricians tend to endanger families in this country by insisting that mothers deliver their babies in hospitals even though in almost all other civilized countries, particularly in Europe, most of the babies are still born at home and they have better mortality rates than we do.

Pediatricians tell mothers, as I said earlier, that bottled milk is just as good as breast milk and they further try to put babies in nurseries rather than keeping babies with mothers.

Let me tell you about hospital visiting hours. One of the hospitals that I am attached to break up families in the following way. The mother who has just delivered a baby is allowed to have one visitor at each session and she can choose from one of the following three categories: She can have her husband, her mother, or her mother-in-law. Now, I cannot think of a better way to break up families.

I can go to the other end of the age spectrum and point out how old folks, when they are terminally ill, are placed in intensive care units where their families are allowed to see them 5 minutes out of every hour and they are then permitted to die without any family member ever being consulted.

I don't have to go into the nursing home situation for this committee. One of the things that distresses me greatly is that I get the same emotional feeling undocumented when I walk into a day care center and when I walk into an old folks home, and in both cases I end up depressed. I don't have to stick to just the ways that doctors endanger family togetherness; that happens to be my profession and closest to me.

The field of social service and welfare traditionally in this country has cut off welfare when a father was found in the home thereby providing an incentive for fathers to leave homes. PTA's have limited parents to traditionally bake sales and curtains for the teachers' rooms.

If we take a look at the entire spectrum of medicine, social work, and education, we will see that in our country—and I think it could be shown historically if one goes back to Plato's republic. For instance, Aristotle says the same thing. I can also give you references from Skenka(?). Historically as well as on the present scene, the professional tends to interfere with family togetherness.

Now, the reason why Head Start has succeeded more than others is because Head Start has had a modicum of parent control. However, my feeling is that with a bill as inclusive and as comprehensive as this one, funded to the extent of this bill, that it is absolutely essential to give parents, regardless of their education but because of their wisdom and maybe because of the fact that they have not been damaged by education since, if you would like, I could establish a good case for all of us having been damaged by what is called education, that parents have to be given a definite control over professionals. Now, that is the story of my own metamorphism.

Mr. Brademas. I appreciate that, Dr. Mendelsohn.

You have made a number of assertions again. What you just said now, anyone—at least the gentlemen from Indiana, in any event—could go into a fairly lengthy colloquy with you and I would hope sometime to have that opportunity.

Dr. Mendelsohn. I hope so.

Mr. Brademas. I am going to ask but one question because I have put some others to you in our conversation so far.

You note on page 9 of your statement that the best child welfare system consists of children being raised, not in day care centers by professional advocates but in their own homes and by members of their families. I would make just two or three points and maybe you would comment on them.

First of all, the bill under consideration is not a day care bill. It is often referred to as a day care bill and I can understand that, but day care services are only one of the kinds of services that are possible under the bill. I just wanted to make that point so there would be no misunderstanding that this bill mandates that all services must be provided away from the home.

Second, I can tell you that Senator Mondale and I feel very deeply about the importance of the family. You may be familiar with the leadership of Senator Mondale in the other body; in fact, he has conducted a number of significant hearings to try to draw attention to the importance of the family as the basic unit in our society. The bill before us represents one effort. I don't suggest at all that it is a perfect effort to respond to precisely the kind of concern that you have eloquently voiced about the family.

The third point I would make is this, and here I am not at all clear on the implications of your statement. There is the statement that I have just cited in which you say the best child welfare system would mean that children would be taken care of in their own homes.

The fact is that there are several million children in the United States today if we confine ourselves to preschool children under the age of 5 whose parents work. That is, without the passage of the legislation under consideration. They are out there, their parents are out there now away from the homes, as it were. What about their situation? In other words, it is all very well to say, would it not be wonderful if they didn't have to work and one of the parents could stay home all day and take care of their very young children. In point of fact, as we have been hearing in the hearings here, there is an increasing incidence of working mothers in the United States, to cite the most dramatic illustration, many of them working not solely for motivations of self-fulfillment, but putting that to one side because they must work to support their family. To say to them in some utopian way, "You really should not be out working to support your families, you should be sitting at home with your children," is not a very helpful observation.

What do you say to that problem?

Dr. **Mendelsohn.** Let me as sincerely as I can address myself to your question, sir. In the first place, I believe that you and I both have the same basic goals and that is the preservation and strengthening of the family.

Mr. **Brademas.** That is correct.

Dr. **Mendelsohn.** I think our problem is the implementation of those goals. At one time I felt that this kind of legislation could do it. On page 2 or 3 of my statement I point out my involvement with Senator Mondale and also I might mention others—Senator Percy before whose committee I have testified, Senator Proxmire and at one time Senator McGovern who worked on a bill that at that time was considered—I don't think it was ever introduced but it was considered idealistic, utopian, and that was a bill to achieve the kind of welfare that all the other kinds of governments have and that is children's allowances.

As Billingsley pointed out in his book, Europe gives money which strengthens families and the United States gives money which weakens families.

All of us are concerned about children brought up by working mothers. What I want to be sure from the standpoint of my own conscience and because I don't want to increase the burden of guilt I already carry around for more things I have done in the past, I want to be sure I don't increase the number of working mothers, the very acts that are designed to help their children.

Let me give you some concrete examples. Let's say we want to have day care centers. Is it better to have day care centers near the home or is it better to have them in factories and office buildings where mothers can get away and breast feed their kids and in other ways see them during the day? In this country today day care centers in factories and office buildings are extremely rare.

A second example, let's take the worst possible cases of children who are abused and battered by their parents. This is a subject which as a pediatrician as well as a societal problem has interested me for years. I would contend at the present time and I intend to give the mechanism by which this is achieved, the present mechanism of helping abusing parents is indeed increasing. Helping abusing parents is in effect increasing the number of abusing parents. At the present time if the child walks into my hospital and he happens to have a high fever and the admitting physician happens to see a bruise on his leg, the child and his mother are referred to a social worker who begins an interrogation similar to the Spanish Inquisition in order to find out if anybody has been abusing this child, with the idea of separating the mother from the child. The doctor has been taught to have a high index of suspicion and therefore many children are labeled as possibly having been abused when in reality they have not been.

Let's say that a mother has been found to abuse her own child and let's say that we do not want to separate them but we want to provide services in the home.

I agree with you this is not exclusively a day care bill. There are two ways that we could provide homemaker service. We would let the professionals decide who the homemaker is going to be which is the present system. If a mother gets a homemaker today, the social worker agency decides who the homemaker will be. Or we can say to the mother, we would like to come in and assist you and we will choose somebody who you approve of and we will fund that person. Now, at the present time there are a number of programs as mentioned in your act—the Head Start program which provides services to children in their own homes but again these services are given by people who do not have to meet the parents' approval or consent and who are not selected by the parents.

I do not want to impose the professional class and their billions of paraprofessionals on the subleties and nuances of family life.

Mr. BRADEMAS. You are aware that this legislation is not mandatory, and parents do not have to participate in this program should it become law.

Dr. MENDELSOHN. I am aware of that and I think that it is an important statement. Number one, parents don't have to participate. The second important statement is, as I mentioned before, that none of these statements in the act shall be construed to restrict the legal rights of parents; yet my concern is that the parents need more protection than is given in this bill. I have watched in my own State the gradual infringement of the various agencies—and I don't mean State agencies, the private agencies are equally guilty in this. I have watched the infringements on particularly poor parents but also increasingly middle class parents. I am interested in setting up a mechanism that will insure that the statements that you and I are making will indeed be implemented.

That is why I think this Office of Parents' Rights is such an important addition to this bill. I want to see a parent have recourse against our own bureaucracy where he does not have to go out and hire a lawyer himself.

Let me put it this way. I am able to appear here before this committee because I can afford to pay my own way to come here to Washington, but most of the people who are going to be affected by this bill—and let's face it, how many of us are ever going to send our kids to day care centers and have homemakers come into our own homes. The people who are affected by this bill are never given the opportunity to appear before this kind of group.

Mr. BRADEMAS. I must say I cannot agree with that statement, having worked on this bill for 5 years. We have had a number of parents come in and testify over the years, Dr. Mendelsohn.

Dr. MENDELSOHN. I apologize. I was not aware of that.

Mr. BRADAMAS. That is all right. I simply wanted to set the record straight.

Thank you very much, Dr. Mendelsohn. As I said, I hope sometime we will have a whole evening together to pursue these matters.

Dr. MENDELSOHN. I look forward to that. As a matter of fact, I am going to call and ask if we can make a date for that.

Mr. BRADEMAS. All right.

I will call on Mr. Cornell of Wisconsin.

Mr. CORNELL. Thank you very much.

I must say that normally after about 3 hours of testimony I am nodding a little bit and that certainly has not been the case today. I have found your remarks very interesting.

Dr. **Mendelsohn**. Thank you very much.

Mr. **Cornell**. I would like to first point out that one of the statements that you made on page 9 I heartily agree with when you refer to this opting for the operation of money rather than services. I would like to use this opportunity to point out that I have reintroduced a bill that was introduced last December by Mrs. Griffiths who is no longer in Congress for the negative income tax. The very point of the legislation of course is to provide money rather than services that would replace for instance the aid to families with dependent children. It would replace the food stamp program as we have it today. It would provide in such a way that fathers would not have to leave the home in order that the family would get such support. I was happy to see that you had included that. However, I do have a few questions I would like to put to you.

One, you talked about the councils involved here with these programs to be made up entirely of parents. That is one of your recommendations. Do you really think that is practical from your own experience? Has it worked out? I have been a teacher and administrator in educational institutions for 34 years and I have found it very, very difficult to get parental participation.

Dr. **Mendelsohn**. Let me speak to both your points. First, I have been aware of your contribution in the field that you mention. Second, I would like to point out that I think it is impossible to characterize my position as falling within the category of either liberal or conservative. I might say that in regard to the negative income tax or even in regard to the issue of raising the present family exemptions, I have spoken about this with people from broad spectrums, such as on a recent radio program with Congressman Philip Crane and found that there is a great consensus from one end of the spectrum to another on these kinds of issues. I don't think that the issue of family falls into any narrow category.

In regard to your second point, the question about the councils, let me give you a specific and then a generic answer. In my own hospital I served for a few years as head of the outpatient department. In that capacity we established review committees to handle parents who felt that their children didn't receive proper treatment. The committees were set up so that parents were invited and a variety of incentives were created to insure their attendance such as taxi fare, free meals, calling up their employers to see of we could arrange for them to have the afternoon off, and then when the parents did come they were put in the controlling position.

Now, I admit that the reason why this happened was because I was the director. It does not happen with everybody. It requires somebody who is willing to take the side of the parents. We all know that the best of legislation can be undone by the wrong people in leadership positions and the worst legislation can turn out well if you have the right people running it. In this kind of circumstance the parents have the opportunity to guide—and let me use a stronger word, to discipline the professional staff. I watched this in my own hospital. I have watched this in headstart programs. From 1967 to 1971 I watched this on Indian reservations where I watched the growth of parent's councils, and as they developed more power they also became a greater threat to the establishment, both professional and administrative.

Mr. **Cornell**. You mentioned the inducements that were given to get them there. Were these ongoing or subsequently did they come? I have attended, for instance, labor union meetings where they paid each person that showed up $3 in order to get them there. Now, you were giving similar inducements.

Dr. **Mendelsohn**. Yes.

Mr. **Cornell**. Did the people subsequently actually participate or did you have to use those inducements to get them there?

Dr. **Mendelsohn**. My answer to that is twofold. Some of them come without the inducements afterward but frankly, Congressman Cornell, I don't like to depend on that. I would rather keep the inducements coming particularly for any new parents on the scene. Therefore, if we were going to implement this kind of action to insure parent involvement, we would have to talk about free transportation to meetings, we would have to talk about support secretarial and legal services to the parents' executive committee. We would have to talk about possibly an honorary for attending meetings just like I get.

We would have to get rid of some of the notions that we have that have become part of American tradition. Right now we don't give money to poor folks because if you give poor folks money—and I apologize for lecturing—they spend it on potato chips, cokes, TV, cars, and fornication—not like rich folks. That kind of attitude has become as American as apple pie and that is in terms of giving parents a honorarium to attend meetings even though we give professionals honorariums.

Mr. **Cornell**. You say that parents should become involved simply because of the fact it is their children and they make the determination not the professionals. I agree with you, sir, that is an ideal.

You have stated on page 9 unattainable ideal and then subsequently in suggestions you mention about having the councils entirely made up of the parents. To me it is my personal opinion again as it is yours that this is an unattainable ideal and should have been placed on the previous page and not as a suggestion of how the measure should be changed.

One other thing that you had mentioned. You said that in regard to this question, for instance, of the negative income tax you didn't consider yourself a liberal or a conservative or what-have-you, but certainly you agree, as was noted before, that as far as mothers working outside the home, while they are probably working for self-fulfillment, they feel they should not be restricted to child bearing in the home. Figures indicate the largest percent of them working outside the home is due to the fact that they feel obligated to supplement the family income, so as a consequence measures that we use as a family allowance system basically, that is what my negative income tax is. It would be desirable from that point of view certainly reducing the women who must leave the home in order to supplement their family income.

I better let this pass on to the other members here. The one thing I did want to say was that I found your statement very interesting—I suppose you could say controversial in the point of view of what we have heard previously in the committee hearings. Certainly I assure you that in considering because of what you have said, especially your argument on an honorarium.

On the bottom of page 11 I certainly would not want to vote for a bill that would have such dire effects as you predicted there.

Dr. **Mendelsohn**. Congressman, if I can just respond with about two or three sentences.

What you said about my failing to include enough in my unattainable ideal is a view that is shared by my wife because when she read my testimony before I came here she said "You are asking for 100 percent of the council to be parents; you should put that under your unattainable ideal." I suppose part of this is a ploy to see how much I can get while appearing to be practical and realistic so that I can possibly try to avoid the tag of a visionary. It is very hard these days because your proposed legislation of a negative income tax is so reasonable that it stands almost no chance of being accepted. I don't really care which mechanism we use to get more money into the hands of parents, I support all mechanisms. At the present time I see no mechanism that stands any chance of success and I am concerned that this legislation further takes control away from parents in addition to giving them no money.

Now, at the present time parents and the American family have been so weakened that we cannot depend solely on the natural instincts—at least this is my view—and the love that parents and other relatives have toward their own children because the ties have been weakened by the helping professionals as well as by society in general.

In my neighborhood in Evanston, Ill., the old homes all have apartments in the back with stairs and a separate kitchen which are called mother-in-law apartments but none of the new homes have them because under the new system old folks live 20 miles away in the inner city and their children live out in suburbs and there is not any interaction between the children and their parents.

The American industry transfers executives from one city to another so by the time the third move has been made there is no family left at all. I think that inducements and incentives and aid must be given to bolster the family at this point so we cannot simply depend on instinct. That is the kind of thing I think we should try to write into every piece of legislation.

Mr. **Cornell**. I understand what you mean and, of course, I have to speak hypothetically. If I had children, I, myself, do not need these inducements. I am speaking from a personal view, and obviously from what you said originally in your opening statement you feel the same way.

Dr. **Mendelsohn**. Let me just say according to my religion, father, you do have children because according to Jewish——

Mr. **Beard**. If he has, I am going to write to the Pope.

Dr. **Mendelsohn**. According to the Jewish religion, students and pupils are considered as children, and I know that you have plenty of students and pupils.

Thank you very much for your encouragement.

Mr. **Beard**. I have just one point and I will try to make it short. The family in this country—I think it is the foundation of our own society and it has to be that way, but you also have to recognize, too, that we are living in a society where in most cases the two parents are working because of economics.

Also, too, you mention about the professional people not necessarily being in the best interests of that child because it may be certain influences and so on, but also, too, you have parents—you mention about a panel or an advisory board to this type of thing would be all parents. Let's face it, some parents don't know enough to get in out of the rain and so it is not necessary. Even in the homes sometimes the child would be better off in a day care center or a center where he would probably get a greater degree of care because of the fact that he may have a situation at home—his mother may be an alcoholic or there may be some very serious problems. Naturally in a family that is the best position. In the family where there are two loving parents you cannot match it or beat it. Even with all the professional help, still people have to work, some families have to go sometimes to centers and that is the next line of defense. We hope that these centers would be good and that the children would be given good care, loving care from outsiders. You have to recognize I think the three possibilities. Yes, one, the family is number one; it is a good family but sometimes that family is broken up and it is not always in the best interests of the child. Sometimes that center could be the top priority for a certain child.

In my case here, my son 5 days a week is without a father. I talk to him on the telephone but I think also too it has given him a dimension that he has become a little independent—not more dependent but more standing up on his own two feet. He talks to me. I don't see too much of a change when I come back on the weekends. I don't think it is hurting him yet, he has his mother, but he lacks certain things. At night sometimes he has to play with the fellow next door, basketball and so on. So it creates a hardship. That does not necessarily mean that it is going to destroy or alter his life or that it is going to hurt him. I don't think it will hurt him but I think we have to adjust to our society. I think what we should have in all this society is good safety conditions, good people that are loving even if it is a so-called outsider and maybe show the same love as some of the parents or some people not so long ago with the adoption of Vietnamese babies. That was concern again for outsiders and probably in some of these adoptions they are going to get love, and although it is not their child, maybe a little more, maybe if they had their own child because they are special, they seem special to them, they made a tremendous effort.

Do you know what I am trying to say to you?

Dr. MENDELSOHN. Yes. Let me see if I can comment on this in any relevant fashion. I plead guilty at the outset to making generalizations. Now, I was taught in school that you should not generalize, but since most of the other stuff I learned in school was wrong, I have a feeling that this is wrong, too. I think it is important to generalize because then we can determine what the exemptions are but in the meantime the only way we can make any decent conclusions is to make generalizations.

Let me tell you how in my professional capacity I handle a child who comes from a home that contains an alcoholic or, say, whose parent is a narcotic addict. What I do is I sit down with whatever family is left, and usually it is extremely fragmented. I sit down and make out a list of all the relatives who they have because almost everybody has relatives.

Now, sometimes they don't have any relatives. I consult with a State and mental hospital where sometimes we have children with no relatives and then we have to create an artificial foster guardian parent or big brother or big sister program. If I have somebody who lives in city of Chicago whose parent is a chronic alcoholic, I will try to get that child to live with another relative who lives close by, maybe a cousin or an aunt or an uncle. I am usually successful because my impression is that blood relatives will do things for their own kin that nobody else is likely to do except maybe people who belong to very strong churches. I find that Mormons and Mennonities and traditional Catholics and Jews and others behave like family members. In general I don't intend to scientifically prove that blood is thicker than water but I have a hunch it still is.

That is how I would prefer to see the problem handled. I would prefer to see, for example, social agencies who are faced with the problem of homeless children or battered children look at the families first before they go to nonblood related foster parents or adoptive parents. I feel that every possibility of care by family members should be totally exhausted before we go to nonblood lines.

Now, if I accept that view, then my conclusion has to be that the best possible day care center is not as good as even a very bad family. That family takes precedence over any kind of institution. That if our country is going to make it, it will not be threatened by inflation, by Watergate, by political scandals nearly as much as it will be threatened by the basic destruction of the family.

Now, you mention your own family. That is one of the things that here I run the risk of invading territory beyond any right that I have to but I have been concerned about the State legislature in Springfield, Ill., and indirectly about Congress because I have watched sessions get longer and longer and I have watched vacations get shorter. I have watched the State legislature go from a biennial to an annual session. Since nowadays I think in terms all the time of what that does to families, I know that legislatures—whether they are in Springfield or whether they are in Washington—are not having the interaction with their families that they should have.

Akin to this is the disappearance in recent months and years of the family fare on the airlines so that now when your wife travels with your kid it costs double instead of what it would have earlier. I have a feeling that when we look at the rules that govern Congress and at the kinds of prerequisities and expenses that are given to Congress that we ought to look at it in terms of promoting greater closeness between Congressmen and Senators and their families because I have a feeling that if you were with your family—I don't mean you personally, but if Members of Congress were with their families as often as I am with my family, and that includes my inlaws and my aunts and cousins and everybody else, that if you had the opportunity to be at home every night like I am at home every night, and even when I come to Washington I stay with my own family because I know they are going to protect me and take care of me—I have a feeling that some of the things that we are having trouble reaching a consensus on will be almost automatic.

I don't mean to inject personal considerations into this but I think that the idea of you being separated from your kids for a long period of time is of concern and of legitimate concern and special measures have to be taken to compensate for that kind of deprivation that children must be suffering and that as a father we must be suffering because I think we lose as much by not being with our kinds as they lose by not being with us.

Mr. **Beard**. Just one last thing. I disagree on the last part. In my case—I know you didn't pinpoint my own individual case but I think my son is getting an education he has never received in his life even at 10 years old because he keeps up with my life. He met the Speaker, he knows the breakdown. Kids study 5 years in school before they catch on to that. The fact that he sees me by way of television or by way of the radio or the picture in the newspaper or something back home, he knows exactly.

I asked him one day, "What is my job?" He said, "Your job is to serve people." So I think that that compensates for the 5 days a week, the fact that, thank God, he has that outlook.

Dr. MENDELSOHN. I say with humility that he has a father that he can be proud of.

Mr. BEARD. Well, I appreciate that.

One last point. I could not help thinking about this here. You are a doctor. John Brademas was here a few minutes ago; I believe he was a Rhodes Scholar. That is going right to the top. He has a tremendous educational background, professional politician, wonderful Congressman. I think we need professionals all during the lifestyle of our youngsters. We need professional people, we need the scholars, the professional politican, and we need commonsense.

I feel like one of the wonders because I got elected on 78 percent of the vote, less than 9,000. I was a 50 to 100 underdog. So it had to be something in the area of common sense.

I think we have to have the average person here, we have to have the educated and the professional politician and we have to have the dialogue with you the scientist or the doctor. So it takes that whole operation to make this country work.

Dr. MENDELSOHN. Thank you.

Mr. CORNELL [presiding]. And the clergyman.

Mr. BEARD. And the clergyman.

Now, I must say Mr. Hall has family interaction.

Mr. HALL. Old schoolteachers, too. Former schoolteachers.

What Mr. Beard didn't add, he said his children were getting an education second to none. I think, Mr. Beard, I am getting an education second to none because I am a freshman and it is certainly an education to come to Congress. You certainly gain a spirit of compromise after a little while if you didn't come here with one.

I was reminded when you and Chairman Brademas were having your philosophical exchange that somewhere back down the line I had—I can't think of the name but the refrain comes to my mind that he would be held in highest esteem among his fellow men cherishes nothing but opinions, so in that light I would appreciate your opinions. I always find it refreshing when I hear medical men and lawyers say that through their careers they have been willing and able to change their minds. So I think there is much merit in what you said this morning. I, too, have been very concerned about what I consider the State and Federal Government getting involved in the role of parents or the parent business, if you will. My concern is, I think as yours is, with the eroding of family life or I see as the eroding of family life. So I want you to know that there are some members on this panel that find much of your testimony, with which I agree, very refreshing.

Thank you for coming.

Dr. MENDELSOHN. Thank you Congressman.

Mr. CORNELL. Thank you very much, Doctor.

Dr. MENDELSOHN. Thank you very much, Mr. Chairman.

[The prepared statement of Dr. Mendelsohn and other information supplied follows:]

TESTIMONY - June 20, 1975. ROBERT S. MENDELSOHN, M.D.

JOINT HOUSE-SENATE HEARING ON THE CHILD AND FAMILY SERVICES BILL
(H.R. 2966)

INTRODUCTION

I am Robert S. Mendelsohn and am here today representing no organization or group. Therefore, responsibility for my statements is exclusively and totally mine. The request for my testimony was initiated by your committee.

At the outset I would like to express my deep appreciation to your Subcommittee for inviting me to testify.

I well remember the opportunity given me by Senator Mondale and his colleagues on the Subcommittee on Employment, Manpower and Poverty, when on August 4, 1969, I was privileged to appear as the opening witness in hearings on S. 2060 to provide for an expanded Head Start Child Development Program.

I also will never forget the interest and personal concern shown me by Congressman Perkins when, on March 24, 1969, I appeared before the Committee on Education and Labor, of which he was chairman, and spoke in opposition to the proposed transfer of Project Head Start from the Office of Economic Opportunity to the Department of Health, Education and Welfare. I am sure that Congressman Perkins and others will recall that that testimony resulted the very next day, March 25, in a request by the American Academy of Pediatrics for my resignation from the position of National Director of the Medical Consultation Service of Project Head Start.

I had a subsequent opportunity in 1970 to appear before another committee of which Senator Mondale was a member. That was the Senate

Select Committee on Nutrition and Human Needs, chaired by Senator McGovern. In addition, I have in the past been asked to comment on early drafts of the proposed legislation now before us.

My intent in recounting this historical background is to indicate the documentary sources that demonstrate the progression of my thinking in the field of child development. That there has been a progression is beyond question, and my thinking today, in 1975, is in many respects quite changed from that of years ago. I hope the experience gained by observing the outcomes of my previous predictions as well as interpreting the passage of events has led to some degree of wisdom which will be reflected in my testimony today.

I have the greatest respect for Senator Mondale and Congressman Brademas. I admire their code of ethics and their record of achievement. Therefore, when Bob Agee, a member of your staff, first phoned me about two weeks ago, I told him of the change in some of my opinions, described them at some length, and cautioned him that my testimony may, in some respects, be detrimental to his cause, namely passage of this bill. He showed a keen appreciation of my situation and, after checking, phoned me again with a declaration that the aim of the committee was to pursue the truth, and he strongly urged me to accept and tell it like I saw it. He further stated that many more individuals and groups than could be accommodated had requested a chance to appear before your committee, but that I had been specifically recommended and therefore called.

You can well imagine how encouraged I was by this response, and what a bright and welcome contrast it provided to the ever-deepening crisis of confidence in our governmental institutions.

Therefore, although initially I was a reluctant witness, I now accept the responsibility of stating my views honestly, forcefully, directly and completely.

QUALIFICATIONS

My Board certification is in the specialty of pediatrics. My major career position is at Michael Reese Hospital in Chicago, where I serve as Assistant to the Executive Vice-President. My primary academic position is at the University of Illinois College of Medicine as Associate Professor in the Department of Preventive Medicine and Community Health. I am also on the faculty of the Erikson Institute for Early Education, and hold the rank of Lecturer in the Department of Education at Loyola University. From 1967 to 1969 I was the National Director of the Medical Consultation Service, Project Head Start, under a contract between the Office of Economic Opportunity and the American Academy of Pediatrics. Since then, I have been the Medical Director of the Head Start programs operated by the Chicago parochial and private schools. My record of academic awards and honors, as well as my list of publications is available to this committee upon request.

LACK OF QUALIFICATIONS

I have never been enrolled in, nor have I attended a day care center. Neither have my children, nor will – I hope – grandchildren I may have in the future. Therefore, I can give no first-hand testimony of the value or deficiencies of day care centers. My entire experience is derived either from personal observation or from second-hand verbal and written reports. I would venture that the same lack of first-hand experience with day care centers applies to most Congressmen and Senators.

SUMMARY OF MY POSITION

In keeping with the request to restrict my oral presentation to no more than five minutes, I will summarize my position as one of deep concern that the present legislation if enacted and implemented may accomplish exactly the reverse of its intent.

Thus, while the stated intent of the Bill is to strengthen families, the reality may be to weaken them. While the image is that of greater parent participation in their childrens' lives, the outcome may be that of further parent exclusion.

The major factor that will determine whether this bill accomplishes its purpose or whether it proves indeed counter-productive is the power relationship between professionals and parents.

The helping professional – social worker, teacher, obstetrician, pediatrician, psychiatrist, psychologist, educator, nurse – represents inherently and in practice, a threat to family relationships. In other words, the so-called "helping professional" may give the image of a family friend, but in reality – both historically and on the contemporary scene – he is the enemy of the family. Therefore, any action that increases the power of the professional (and his minions of paraprofessionals) automatically lessens the strength of the family.

This bill (and I have read it carefully) has the effect of increasing the number, functioning, influence, and power of the professionals absolutely and disproportionately to that of the parents and other family members.

Therefore, unless substantial changes are introduced both in the language of the Bill as well as in the staffing pattern and nature of personnel who will implement it so as to greatly alter the balance of power of professionals versus parents, I predict that this legislation will be judged in retrospect to have been another link in the long chain of public policies that have contributed to the ever-weakening condition of the American family and thus of our beloved country as well.

We will be judged to have behaved, despite the best of intentions, with naivete and misguided enthusiasm. In order to clear, at least partially, my own conscience, and with the belief that my words may influence this committee, I humbly but optimistically appear before you today.

The remainder of my testimony will be devoted to an effort to support the statements made in this summary and to justify my recommendations.

I invite your questions, criticisms and responses at any point during or following this prepared statement.

IS MY TESTIMONY UNIQUE?

The answer is — no. My position, and I append to this testimony a reprint of one of my publications entitled "Parentectomy — Is it ever indicated?" (Child and Family, 1971), has been stated by others at least equally qualified and often more articulate than I. Thus, Andrew Billingsley, Vice President for Academic Affairs, Howard University, in his book, "Children of the Storm" (Harcourt, Brace, Jovanovich, 1972) states

> "The kinds of child welfare services that have come to be institutionalized in the United States are almost exclusively focused on the care of children away from their parents through some sort of substitute parental care." (p. 10)

Billingsley points out the profound contrast between American and European child welfare. European welfare consists of money while American consists of "services;" infusion of money serves to promote family strengths, while "services" tend to endanger and destroy these important linkages.

Thus the term "services" becomes almost a dirty word, not unlike the words "quality care" which have come to mean professional, expensive, usually unavailable, and impossible to evaluate.

Language continues to be one of our greatest stumbling blocks to meaningful communication. Let me give a few examples. Marijuana years ago existed in the inner city and was called "weed"; now, as a result of its spread to the suburbs, it has become upgraded to "grass". A certain kind of person used to be called "promiscuous," but today is referred to, particularly in the medical literature, as "sexually active". V.I.P., once an honorific abbreviation, now refers to an abortion clinic — Voluntary Interruption of Pregnancy. "Poor" has become "economically disadvantaged" and "slum" has become "community". Thus, it is not surprising that for many of us, the words "services" and "quality" have become pejorative in meaning and in tone.

Thomas K. Fagan, Ph.D., Director of the School Psychology Program, Western Illinois University, in the American Medical Association publication "Quality of Life — The Early Years" (Publishing Sciences Group, Inc., Acton, Mass., 1974) states (p. 104):

> "What I sense, and I hope I am wrong, is a belief that as professionals we are in some manner duty-bound to protect children from their parents."

Thus, the child advocate becomes the advocate against the parent, and interferes with the longitudinal transmission of family patterns and cultural heritage.

Some helping professionals favor this kind of interference (they call it "intervention"), particularly in the field of child abuse, where I have witnessed more abuse by well-intentioned professionals than by the accused parent. As a matter of fact, it has become downright hazardous for a poor mother to bring her child to a hospital emergency room. Regardless of his illness, if he has the slightest bruise, he is likely to be subjected to the inquisitional type of interrogation by a well-meaning social worker whose action, whether purposefully or otherwise, often results in separation of mother and child..

The entire disruption of family tradition and cultural patterns has been clothed with a sort of bogus academic respectability by Anna Freud, who together with two other leaders in the mental health field, has published an important book ("Beyond the Best Interests of the Child", Anna Freud, Joseph Goldstein, Albert J. Solnit, The Free Press, N.Y., 1973) which seeks to make a distinction between "biologic" and "psychologic" parenting. One example at the end of the volume carries particular significance for me personally.

When the Dutch Jews were forced into Nazi concentration camps in the 1940s, they left their children behind with Dutch Gentile families. Upon the release of the Jews, some Dutch families were reluctant to return the children, on the grounds that their "best interests" would be served by maintaining the "continuity" of the "psychologic" environment to which they had already "adjusted", rather than replacing them in the hands of biologic parents who had already been severely damaged as a result of the concentration camp experience.

These cases went through the Dutch courts and finally to the Dutch parliament which ruled in favor of the Jewish parents. The children were accordingly returned.

Anna Freud and her co-workers now argue that this decision was wrong! She rejects the classic pediatric teaching that "child development begins with the grandparents". I would dismiss the Freud-Goldstein-Solnit attempt to deny the value of history and family values were it not for the fact that her book is widely used in colleges across the country, and has been a major influence in the education of helping professionals.

THE RELATIONSHIP OF PROFESSIONALS TO FAMILIES

The nurse tends to assume the role of mother; the social worker that of big brother or sister; the physician tends to displace the grandmother with her traditional home remedies; the teacher takes the place of mother or father; and the oldest professional of all tries to replace the wife. Indeed, it is no accident that prostitution is included, not in the category of a business, but among the professions. For in a business transaction, there is an exchange of money or commodities; but in a professional transaction, the professional gives of himself in return for a fee.

It would be well for all contemporary helping professionals to remain aware of their historical roots so that they might better appreciate the inherent threat they pose to the family. According to this view, a viable society consists of many strong families and few weak professionals. The growth of a powerful class of helping professionals poses a dangerous threat to society. Our own American history shows the major growth of our country occurring in an era of strong families, few teachers and doctors, and almost no social workers and psychologists.

THE UNATTAINABLE IDEAL

Even though it cannot be achieved in modern America, the ideal child welfare program should be defined.

The best child welfare system consists of children being raised not in day care centers, not by professional advocates, but in their own homes, by their own fathers and mothers, assisted by aunts, uncles, cousins and grandparents. Somewhat like you gentlemen and I, your children and mine, were raised.

We cannot afford to be guilty of prescribing for the children of others measures we will not tolerate for our own. Therefore, in order to achieve an ideal, single standard, child welfare system, I would opt for distribution of money rather than services; for family allowances (the policy in practically all other civilized countries), and even for an annual wage for motherhood. If parenting were considered an occupation and compensated accordingly, if women were paid as much to stay home, breastfeed their infants, and care for their children as they are now paid for going to work, we would then have a real opportunity to see how many would choose fulfillment through occupations for themselves, and the corollary of day care centers for their children. In this ideal situation, the kind of Child and Family Services bill we are considering today would either be totally unnecessary or drastically reduced in scope.

PRACTICAL RECOMMENDATIONS

However, it does appear to be my obligation to deal with the world — particularly with the United States — as it is, as it exists at this time.

Therefore, my recommendations for modification of this proposed legislation, through amendment or other appropriate procedure, are as follows:

1. Amend Sec 105 (Child and Family Service Councils), (a), (1), line 9. Instead of "not less than half of the members of the Council shall be parents of children served in programs," I recommend it read "all members of the Council shall be parents of children served in programs."

Furthermore, other parent policy and parent advisory committees should be limited to parents; professionals and representatives of private agencies and organizations in this field may serve in an ex-officio capacity, but shall not have the right to vote or hold office.

This will help insure parent control of the program and keep the professional in his proper, circumscribed role. I base this recommendation not solely on theoretical considerations, but on the experience I have accumulated over the years working with and observing both successful and unsuccessful parent participation efforts in Project Head Start.

2. Amend Section 504 (a) which states in part "Nothing in this Act shall be construed or applied in such a manner as to infringe upon or usurp the moral and legal rights and responsibilities of parents or guardians with respect to the moral, mental, emotional, physical, or other development of their children."

This statement, without any enforcement mechanisms, is little more than a pious gesture. In order that it be converted from prayer to reality, I recommend the creation of a special "Office of Parents' Rights" to be headed by a lawyer with special experience and expertise in defending the rights of parents against public and private bureaucracies.

That a supply of such lawyers exists is well recognized. I might only mention an outstanding example from my own state of Illinois, namely, Mr. Patrick T. Murphy, member of a large family with strong religious traditions, author of a highly regarded book entitled "Our Kindly Parent – The State" (Viking Press, 1974) and presently a candidate for the office of Attorney General of Illinois.

The creation of such a special legal staff could offer the necessary counterbalance to the otherwise unchecked grasp for power by the professionals. I strongly recommend this addition to the Act.

MY PREDICTIONS

This Act stands an excellent chance of passing in its present form. It directly offers jobs and money to teachers, social workers, doctors, dentists, educators, psychologists, the television industry, and the construction industry. This combination of interests should suffice to overcome the predictable opposition likely to be generated by those concerned with budget restrictions.

However, in its present form, this Act also stands an excellent chance of resulting in the exact opposite of its intent, i.e., it may well weaken rather than strengthen families. Indeed, it is my prediction that this will be the result, and that we will see further evidence of family deterioration as measured by the indicia of rates of divorce, delinquency, school failure, ill health, mental illness, nursing home placements, and suicide.

CONCLUSIONS

My two recommendations, first, to guarantee not 50%, but 100% control by parents, and second, to provide a legal enforcement mechanism for the rights of parents, will, in my opinion, greatly increase the capability of this Act to achieve its stated goals. If they become part of the Act, I can then enthusiastically support its passage, and I further am prepared to offer, if called upon, all resources at my command to assist in its implementation.

I am convinced that the Act will then be able to provide the first step in turning our country towards a family-oriented public policy and will lead our American families towards that Biblically promised age when, according to the prophet Malachi, "He shall turn the heart of the fathers to the children and the heart of the children to their fathers."

Again, I wish to express my deep appreciation for this opportunity to organize and present my thoughts before the finest forum in the world -- the United States Congress.

Thank you very much.

Robert S. Mendelsohn, M.D.

Mr. CORNELL. Next in line is Dr. Elias Marsh who is the chairman of the New England Children's Mental Health Task Force.

I was wondering if Dr. Marsh would not mind if we would also have at the same time Dr. Theodore Blau, child psychologist, Association for the Advancement of Psychology who, I understand, has an appointment or plane leaving at 2 o'clock.

STATEMENT OF ELIAS J. MARSH, M.D., CHAIRMAN, NEW ENGLAND CHILDREN'S MENTAL HEALTH TASK FORCE, BOSTON, MASS.

Dr. MARSH. I would be delighted to share the hearing with a psychologist. I happen to be a psychiatrist myself. I have long since overcome some of the strings that have divided the profession. I think we are closer and closer together and I am delighted to sit at the same table here with a psychologist.

Mr. CORNELL. Of course, I may be a little biased but I remember one time I taught history and political science and one of the psychology teachers at my institution was complaining that we had no justification for referring to our field as a science.

I said: "Well, you have got a lot to talk about."

He said "What do you think psychology is?"

I said: "Fifty-percent witchcraft and 50-percent sex," and I didn't really get too much of an argument on that.

Dr. MARSH. Shall we take exceptions to that?

Mr. BLAU. No, I agree with it.

Dr. MARSH. I have a fairly long statement here and along with it a copy of the proceedings of the First Annual Children's Advocacy Conference. Senator Stafford was our keynote speaker there.

In light of the time I am not going to come anywhere near reading this statement. I would like to make a couple of observations, however.

First of all, I am here representing the mental health profession and I would like to read a paragraph on page 2.

We of the New England Children's Mental Health Task Force see the Child and Family Services Act of 1975 as potentially the most important piece of legislation to promote the mental health of children that has ever appeared in Congress. We hope that, with a few modifications, it will pass, and we pledge to you that if it does we will do everything in our power to help insure that it achieves its potential.

There are a number of points in this statement that I would have liked to have made if I had had time.

The first several pages summarize why we think that this is important mental health legislation. I will skip over that.

Pages 4 and 5 I will come back to in a minute.

On page 6 at the bottom of the page we make recommendations—and incidentally, the references to the bill in here are all to the Senate bill because we had more opportunity to refer to the Senate bill then to the House bill. I understand there are minor differences between the two but we urge that these places as mentioned—section 102(b) (2) (a) and (b) on page 7, lines 14 and 17, and in section 501 the words "mental health" were added after "health" in all three places and that in section 301 the words "mental, emotional and behavior disorders" be added after the word "diseases" and that is justified in the earlier part of my statement here.

The rest of this has some sections on advocacy for children and this has to do with the role of the prime sponsors that we reached earlier. We happen to be in agreement with what Mr. Welsh said.

About the variability, the variation is prime sponsorship, we think this is a very good sort of thing.

Rights of children, on page 12: We are enthusiatic about rights given to parents in the bill but we would also like to see some safeguards of the rights of children. For example, this is the bottom of page 12, where the rights of parents are most clearly specified, we suggest the wording be modified to read that services will be provided only to or for children whose parents or legal guardians request them, or for children 12 years of age or older who themselves request them.

We know that this bill focuses primarily on the younger children but it also includes some services for the older children and we think they should have some opportunity to participate.

Finally, under the heading of Monitoring, there is a paragraph on that, but in the center of page 14 we would like to suggest that all programs apply for support under section 107 be required to state that they will make an individual plan for every child to be served by the program, and that again is supported in there and there is more material to which it is referred in the proceedings of the conference.

To go back then briefly to page 4, we have strong concern about one point and that is concerning the definition of the "Handicapped" child in section 501(6). That is page 55, line 21.

Of the seven specifically handicapping conditions mentioned in this definition—mental retardation, auditory, visual, and speech impairment, crippling, and emotional disturbance—the only one that is qualified by the word "seriously" is "emotionally disturbed."

Other children do not have to be seriously mentally retarded, seriously hard of hearing, seriously crippled, et cetera, to be called handicapped and be eligible for special attention. Why, then, do we discriminate against the emotionally disturbed?

The kind of discrimination that an emphasis on the seriousness of a disturbance causes is particularly unfortunate for young children where untreated mild emotional disturbances too easily progress to serious disturbance. It seems to us to make no more sense to refuse services to a child until he is seriously disturbed than it would be to refuse dietary supplements to a child because he hasn't yet got rickets.

In practice, in the mental health field, "seriously emotionally disturbed" is often interpreted to mean psychotic, which itself is polite professional jargon for insane or crazy, and is used over and over again by mental hospital administrators to keep troublesome children and adolescents out of their quiet well-ordered hospitals. "Sure," they will say of a particular bad actor, "he is disturbed, but he is not psychotic. We have no place for him." In a paper delivered a year ago, Dr. Jerome Goldsmith of the Jewish Board of Guardians in New York City documented case after case of children wandering around New York, endangering themselves and others because they were not seriously enough emotionally disturbed to fit the programs the bureaucrats had defined.

There is included in the proceedings a suicide note of a very bright 14-year-old who for years had not been considered seriously enough disturbed to have adequate attention provided him.

But if humanitarian considerations themselves are not persuasive, look at the economic ones. Dr. Goldsmith, in the same paper, cites a study of the costs of care for emotionally disturbed children in New York State. "Per annum," he says, "community care came to approximately $3,500 for a single child; day treatment costs $8,000, residential placement $22,239, and hospitalization of a child in a State facility $26,085."

In other words, if you wait for a child to be seriously emotionally disturbed before you start treating him, it is going to cost you at least eight times as much on an annual basis—but actually much more than that, because treatment of a child in the community usually takes much less than a year (less, then, than $3,500 per child), whereas in-patient treatment of "seriously" emotionally disturbed children averages 18 to 21 months. This is in the range of $33,000 to $48,000 per child.

For both humanitarian and economic reasons we most strongly urge that the word "seriously" be striken from the definition of a child who is handicapped by virtue of emotional disturbance.

Going over to my statement on page 9, the working alliance addresses itself very closely to the kinds of issues that Dr. Mendelsohn was talking about earlier.

We are fully in support of the requirements in the act for extensive participation of parents in planning and setting policy at all levels. We believe that this is the way to achieve the effective advocacy for children we have long been seeking. But we are concerned about the pitfalls, the risks and the dangers we see lying ahead. We know that there is knowledge that could help councils avoid some risks and minimize others in order that the least possible time and effort be wasted in developing an effective children's advocacy system. To achieve this requires what we have been calling "the working alliance."

Speaking as a physician I would illustrate the working alliance in its simplest form by the example of the patient who comes to his doctor and says: "Doc, I have got tired blood. You gotta give me a shot." Generally there are three ways physicians respond to such a request. The first is the notorious, paternalistic, authoritarian, doctor-knows-best response of: "Don't tell me what's wrong. I'll decide, and I'll give the orders."

At the opposite extreme the doctor turns to his nurse and says, "Give this guy a shot of B-12," and to the patient, "Ten dollars, please." This is consumerism at its worst in which the doctor, abdicating all responsibility, and denying his presumed expertise, betrays his patient.

Between these two is good medical practice. The doctor says: "Tell me why you say you have tired blood. Let's find out what is really wrong with you and decide together what to do about it."

Carrying this a stage further, suppose the patient said this and the reason the guy was tired was he had diabetes and what he really needed was insulin. I would have been correct. What he needed was a shot. I don't think that this says that the professionalism of the physician was out of place.

I want to skip for purposes of time.

There are friends of mine whose response to the consumer membership in the councils has been that this whole proposal is nothing but a crude, cynical political gesture toward children with the fuse of its destruction built in and lit. We in the New England Children's Mental Health Task Force do not believe this is the case, but we do know of instances where the "consumer" partners in similar councils used the setting to attack the "professionals," and the latter, forgetting what, as professionals, they should have known, responded with the declaration of war which destroyed the whole project and the children who were supposed to have been the beneficiaries were once again victimized.

In the proceedings here, there is a long section on the Working Alliance which was described by Dr. David F. Allen in a paper that he gave at this conference.

> The working alliance between parents, school and community may be * * * defined as the relationship which makes it possible for all parties, even including the student where possible, to work together in the most constructive manner to provide the best quality of education for all children.
>
> It is important that a mutual educated awareness concerning the roles of the professionals and parents be developed in order to facilitate the process of a working alliance. The professional must realize that the parent brings to the alliance an in-depth and experimental knowledge of his/her child; vice versa the parent must respect the ability of the professional in his/her sphere of technical competence. This takes time, patience, mutual respect and understanding. The fact remains that in a true alliance there must be equal input into the decisionmaking process.

Because we are convinced of the importance of this, because we are aware of the difficulties on the end of page 11, we would like to suggest that in the legislation the Secretary be required—or at least be specifically authorized—to develop and conduct demonstrations or inservice training programs on the working alliance, by whatever name it is called, in order to avoid some of the unnecessary consumer-provider clashes that have so hurt other well-meaning programs in the past. A sentence to this effect could be added to section 401 on Preservice and Inservice Training and a similar one added to section 402 on Technical Assistance and Planning.

We do not claim to have invented the concept of the working alliance, nor to be the only ones with skill in developing working groups, but there is expertise in this area in the New England children's mental health task force; and if the Secretary should desire, those of us who have this knowledge and skill would be honored to share it in any way.

Mr. Chairman, I am very appreciative of having been permitted to testify here this morning. I repeat, we would like to support the legislation and we hope the legislation with some modification passes.

Mr. Cornell. Thank you very much, Doctor.

Just a couple points that I wanted to take up with you. One, I gathered from what you said that you agreed with the provisions in the legislation with regard to these councils.

Dr. Marsh. Very much so. And the councils with participation of at least 50 percent parents and also the variation and the types of sponsorship that is permitted under the legislation.

Mr. **Cornell.** Also I presume you are aware that there is—I suppose you could call it a type of disclaimer in the legislation that the previous witness felt was only a pious statement, so to speak, but I notice you suggest that services will be provided only to children whose parents or legal guardians so requested. That would probably be a way of carrying out the same thing.

Dr. **Marsh.** Yes; but adding also, and this is the new thing, that we would include for children 12 years of age or older who themselves request the services. The talk today has been primarily focused on the younger child and we agree that that is really the important thing, but as I read the legislation definition of child it includes up to 15. On pages 12 and 13 we have talked about the rights of children. Yes; we very much agree with the concept that it not only not be forced on parents but it be given only to parents who request it. In certain circumstances we suggest that the 12 and 13 and 14 year olds might also be permitted to ask for certain services on their own, and in terms of informed concept it is covered in title V. We would like to suggest that concept for certain things be obtained from the children themselves 12 and over.

Mr. **Cornell.** Then also I believe that you say the State and local levels of government should be the prime sponsors.

Dr. **Marsh.** Very much so.

Mr. **Cornell.** Rather than for example, say, the public school system as such.

Dr. **Marsh.** I would not arbitrarily exclude the public school systems in any circumstances because I can visualize in some of the New England States that I know situations where a public school system could make an effective prime sponsor, but I would object very strongly to putting this entirely in the hands of the public schools; I don't think they have covered themselves with that much glory.

Mr. **Cornell.** I would like to assure you that from previous hearings in which I have participated here it was understood that when they mentioned the various aspects of services provided under the bill that was intended to include mental health that you have a good point in spelling it out, and also I think you gave a very good statement as regards the elimination of the word—I think it was "serious."

Dr. **Marsh.** We see this as being strongly oriented mental health legislation. There is no question about the intent of it.

Mr. **Cornell.** One last thing. On page 14—I am not too familiar with the various sections of the Senate bill—you said that it should be required to state that they will make an individual plan for every child to be served by the program. Now, are you referring to as far as those who have mental problems?

Dr. **Marsh.** No. I am referring in general to the programs that are to be supported under the projects in section 107, the project applications where they talk about all the great variety of projects; that the act, if passed, money could be used to support them. In all these various projects whether they are really elaborate projects or whether they are relatively simple child day-care projects it has been our experience and observation that when it is required that an individual plan must be made out and written out for each individual child, the child has much less danger of being lost in the bureaucratic masses than if you just go on one way or another. It is that concept that we had in mind here.

Mr. CORNELL. Thank you very much, Doctor.

We have another member of the panel here, Mr. Hall.

Mr. HALL. I want to thank the doctor for his testimony, Mr. Chairman.

I would have no other question other than to state in light of previous testimony the fact that parents should spend more time with their children. I promised to take them to lunch, so I hope you will excuse me.

Mr. CORNELL. Thank you very much, Doctor.

[The prepared statement of Dr. Marsh follow:]

STATEMENT

before the joint hearings on the

Child and Family Services Acts, S. 626, and H.R. 2966

by

Elias J. Marsh, M.D.

I am speaking as immediate past Chairman of the New England Children's Mental Health Task Force, which I will not take the time to describe beyond saying that we are a group of professionals from the six New England states in various fields of work with children--psychiatry, psychology, social work, education, pediatrics, child development and the like--who have been in existence for five years, and last winter, with the assistance of a grant from the Region I Office of the United States Public Health Service, put on a Children's Advocacy Conference in Durham, New Hampshire, at which Senator Stafford of Vermont was our keynote speaker. I myself am a child psychiatrist who spent twenty-five years working for and with children in state mental health programs in Connecticut, and have had close personal and professional contact with thousands of children and their families, white, black and Puerto Rican, from all socio-economic levels.

The Children's Advocacy Conference in New Hampshire took place before the Child and Family Services Act was introduced, so none of the discussions there concerned it specifically. Altnough we did not know it at the time, it is now obvious to us in retrospect that in his keynot address Senator Stafford must have had in mind the need for, and the timliness of the about-to-be-introduced Child and Family Services Act. He said:

> "While we spend millions on the physical survival of these young people, we spend virtually nothing on research programs designed to help these children cope with their altered living conditions. This despite the fact that we know the impact of altered physical conditions is profound. . . Our young people constitute the most important social and economic resource of our society, and . . . our future depends upon how well we are able to develop that resource."

As we have studied this Act over the past several months since we first saw it, we have been increasingly impressed by its potential for bringing about many of the very objectives that were of such deep concern to participants in the Durham Conference. These concerns are recorded in the Proceedings of the Conference, a copy of which is attached to this statement.

We of the New England Children's Mental Health Task Force see the Child and Family Services Act of 1975 as potentially the most important piece of legislation to promote the mental health of children that has ever appeared in Congress. We hope that, with a few modifications, it will pass, and we pledge to you that if it does we will do everything in our power to help ensure that it achieves its potential. I say this in this way because we see some problems in the implementation of the Act, especially in the area we refer to as the "working alliance." I shall elaborate on this issue later in my statement.

First of all , let me point out why we as mental health people believe this Child and Family Services Act is such important mental health legislation.

The Joint Commission on Mental Health of Children submitted its report, Crisis in Child Mental Health: Challenge for the 1970's to the Congress in 1969. This report contained over two hundred recommendations, supported by an overwhelming mass of data that proved that:

1. Poverty was the single most important cause of physical and mental illness.

2. The prenatal period and the first three years of life were the most critical to the child's development and future capacities to function effectively as child, adolescent, and adult.

3. Racism was indeed a major mental health problem, with great

> deleterious effect on the mental health of whites, and overwhelming destructive impact on the lives and mental health of minority children, adolescents, and adults.
>
> 4. A developmental preventive approach made the most sense. Bandages for the walking wounded and beds for the maimed meant that we were doing too little too late. But a preventive approach did not in any way reduce the need for funds to provide health and mental health services to children and families already in need. *

Official response to these findings and recommendations boiled down to 1) the creation of the Office of Child Development, which was promptly emasculated, and 2) passage by Congress of the Child Development Act, which was promptly vetoed.

The Child and Family Services Act of 1975 is exactly in accord with the major recommendations of the Joint Commission on the Mental Health of Children. Its clear goal is to strengthen the family:

it focusses on the pre-natal period and the first few years of life;

it encourages a developmental preventive approach in the broadest and most positive way;

it enlists the participation of those who are closest to the problems, in planning and in the development of policies, and finally,

in the Office of Child and Family Services it provides a focus for child advocacy at the very highest level, and the foundations on which many of the other recommendations of the Joint Commission can be built.

We endorse, one hundred percent, the Statement of Findings and Purpose of the Act. Specifically we agree that the family is the primary and most fundamental influence on children, and we believe that this Act as proposed, if it is passed and funded, will make a tremendous contribution to strengthening family life.

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* Paraphrase of the Joint Commission's findings by I. N. Berlin, M.D. in Psychiatric Annals, v., 221, June, 1975.

Having registered our very strong enthusiasm for the overall thrust and intent of the Act, I must express our equally strong concern about one point, which might seem minor to some, and our more moderate concern about a second point. Then I would like to comment on several other aspects of the Act.

First is our concern about the definition of "handicapped child" in Section 501 (6)--page 55, line 21. Of the seven specifically handicapping conditions mentioned in this definition--mental retardation, auditory, visual and speech impairment, crippling, and emotional disturbance-- the only one that is qualified by the word "seriously" is "emotionally disturbed."

Other children do not have to be seriously mentally retarded, seriously hard of hearing, seriously crippled, etc. to be called handicapped and be eligible for special attention. Why, then, discriminate against the emotionally disturbed?

I recognize that "handicapped child" as defined here is directly adapted from other federal usage, but in our own experience, and in that of many of our mental health colleagues, the qualifier "seriously" has served to discriminate against a significant group of children and exclude them from desparately needed services. Just because a discriminitory error has crept into previous practice is no reason to perpetuate it in this otherwise so positive and progressive legislation.

The kind of discrimination that an emphasis on the seriousness of a disturbance causes is particularly unfortunate for young children where untreated mild emotional disturbance too easily progresses to serious disturbance. It seems to us to make no more sense to refuse services to a child until he is seriously disturbed than it would be to refuse dietary supplements to a child because he hasn't yet got rickets.

In practice, in the mental health field, "seriously emotionally disturbed" is often interpreted to mean psychotic, which itself is polite professional jargon for insane or crazy, and is used over and over again by mental hospital administrators to keep troublesome children and adolescents out of their quiet and well-ordered hospitals. "Sure," they will say of a particularly bad actor, "he is disturbed, but he is not psychotic. We have no place for him." In a paper delivered a year ago, Dr. Jerome Goldsmith of the Jewish Board of Guardians in New York City documented case after case of children wandering around New York, endangering themselves and others because they were not seriously enough emotionally disturbed to fit the programs the bureaucrats had defined.* And in the introductory comments I made to the Children's Advocacy Conference last winter--included in the Proceedings--I quoted the actual suicide note of a very bright fourteen year old boy denied appropriate treatment for at least eight years that I knew of, because he was not considered psychotic--not seriously emotionally disturbed.

But if humanitarian considerations themselves are not persuasive, look at the economic ones. Dr. Goldsmith, in the same paper, cites a study of the costs of care for emotionally disturbed children in New York State. "Per annum," he says, "community care came to approximately $3,500 for a single child; day treatment costs $8,000, residential placement $22,239, and hospitalization of a child in a state facility $26,085."*

In other words, if you wait for a child to be seriously emotionally disturbed before you start treating him, it's going to cost you at least eight times as much on an annual basis--but actually much more than that, because treatment of a child in the community usually takes much less than a year (less, then, than $3,500 per child), whereas in-patient treatment of "seriously" emotionally disturbed children averages eighteen to twenty-one months. This is in the range of thirty-three to forty-eight thousand dollars per child.

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*Goldsmith, J. M., Ed.D., and Schulman, R., M.S. The child as victim a system of paradoxes. Paper presented to the Annual Meeting of the Amer. Orthopsychiatric Association, San Francisco, April, 1974.

For both humanitarian and economic reasons

WE MOST STRONGLY URGE THAT THE WORD "SERIOUSLY" BE STRICKEN FROM THE DEFINITION OF A CHILD WHO IS HANDICAPPED BY VIRTUE OF EMOTIONAL DISTURBANCE.

Our other narrowly mental health concern is closely related to this one but slightly less urgent. I mentioned earlier that we mental health professionals see in this Act a very important piece of mental health legislation. Throughout it there is a strong mental health orientation: Section 102 (b)(2)(H) --page 9--, for example, refers to the diagnosis, identification and treatment of ". . . mental, psychological and emotional barriers to full participation" in various programs. However, earlier in this same section--Sec. 102 (b)(2) (A) and (B), page 7--where there is a long list of a wide range of services that may be supported under the act, including health, nutritional, social, recreational, educational services and so forth, there is no mention of mental health services as such. Furthermore, in Title III--Sec. 301 (a)(3), page 51, line 20--there is no authorization for research into the emotional or behavioral disorders of children, although in this section practically everything else one could think of is included. And in Title V--Sec. 501 (3), page 55, line 8--there is a comparable omission.

It may be said that health includes mental health, and, so far as I am concerned, that is true, but the unfortunate fact is that in practice too often mental health has been specifically excluded from general health programming. We urge that in Sec. 102 (b)(2)(A) and (B)--page 7, lines 14 and 17--, and in Sec. 501 (3)--page 55, line 8--the words "mental health" be added after "health" in all three places, and that in Sec. 301 (a)(3)--page 51, line 20--the words "mental, emotional and behavioral disorders" be added after the word "diseases."

In the rest of my remarks I shall not be speaking to narrowly mental health issues, but rather to the broad thrust of the legislation that we mental health professionals find to be so potentially supportive of children generally, and thence of their mental health.

I shall group my comments under four headings:

1) Advocacy for children
2) The working alliance
3) The rights of children, and
4) Monitoring.

1) Advocacy for children. The most visible, and in some ways the most important centers for child advocacy are in the Offic of Child and Family Services (Sec. 101 (a)), which will provide a focus for advocacy at the federal level, with far greater potential than the old Children's Bureau did in the past or than the Office of Child Development does now, and the parallel offices with similar potential for advocacy at the level of state government (Sec. 108).

These, of course, are not the only mechanisms for advocacy in the act: the Child and Family Service Councils, and similar bodies proposed throughout provide for important grass-roots support that is the essential source of all truly effective advocacy. Children need visible, sanctioned, and institutionalized advocacy at all levels of government.

Because of the variety of auspices and structure permitted by the Act for Prime Sponsors, opportunities for truly effective advocacy at the local, community and state levels may be exploited to develop a public-private partnership from which can grow a comprehensive, coherent service delivery network.

Public moneys, it has been said, should be spent only by public bodies under the direction of public officials, and the recent scandals in the private nursing home industry have been used to damn all private efforts in welfare, health, and even education. We do not agree: uncontrolled, unmonitored operations can be a rip-off, but that is independent of whether their auspices are public or private. What is really important is that each community have the opportunity to develop its own program according to its unique needs. This the extensive consumer participation in program planning and policy-setting not only allows bu encourages. The rugged individualists in New England welcome the flexibility localities are permitted in designating their own Prime Sponsors, and the further flexibility they are given in setting up programs for children. The children need all the kinds of advocacy they can get.

Dr. Karen Davis, in a paper she wrote for the Durham Conference, pointed out why this is so. In part she said,

> "The limited attention given to the health care needs of children is carried over to a host of issues concerning children--education, welfare services, social services, day care. In each of these the needs of children, particularly low income children, are not matched by budgeted funds. Each year the elderly demand, and receive, rising social security benefits. Corporations receive investment tax credits and a host of tax advantages. Why are similar pressures not exerted on behalf of children?
>
> "There are, I think, at least three reasons which contribute to the low priority accorded children in public programs. First, quite simply children do not vote. While their parents do, their votes can not make up for the missing voices of children at the polls. Those over age 65 may represent just ten percent of the population, but they represent twenty percent of all eligible voters.
>
> "Secondly, the welfare of children has always been considered a family responsibility in the U.S. A greater role for government in the care of children is associated, by some, with the practices of totalitarian regimes which would usurp the responsibilities traditionally accorded to parents in a free society. Even if parents are accorded free choice among public services for their children, public payment for those services is viewed with suspicion by some.
>
> "Finally, and, I think, most importantly, children have shared in the punishment meted out by society to those who are unable or unwilling to obtain an adequate income through market work. Those parents who encounter marital breakups and must devote their

> to household activities rather than market work, those who are unprepared through intelligence, education, or training for adequate jobs, those who are unable to find even substandard jobs in a restricted economy are shunned by a society that places high value on the work ethic. Children suffer along with their misfortunate parents as society refuses to support programs which would compensate parents who are unable to 'earn' a living. Only those clearly blameless -- the aged, blind, and disabled -- are excused from market work."*

If you can I would urge you to read Dr. Davis' provocative paper--which is published in the Proceedings of the Durham Conference--in its entirety.

2) The working alliance. We are fully in support of the requirements in the Act for extensive participation of parents in planning and setting policy at all levels. We believe that this is the way to achieve the effective advocacy for children we have long been seeking. But we are concerned about the pitfalls, the risks and the dangers we see lying ahead. We know that there is knowledge that could help Councils avoid some risks and minimize others in order that the least possible time and effort be wasted in developing an effective children's advocacy system. To achieve this requires what we have been calling "the working alliance."

We have used the expression "the working alliance" as a way of summarizing the principle that, in so far as possible, those who are going to be affected by a decision should have an opportunity to participate in making that decision.

Speaking as a physician I would illustrate the working alliance in its simplest form by the example of the patient who comes to his doctor and says, "Doc, I've got tired blood. You gotta give me a shot." Generally, there are three ways physicians respond to such a request. The first is the notorious, paternalistic, authoritarian, doctor-knows-best response of "Don't you tell me what's wrong. I'll decide, and I'll give the orders."

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*Davis, K. Ph.D., What price children?: Budget priorities, children, and health care. Proceedings of the First Annual Children's Advocacy Conference, Durham, New Hampshire, January, 1975. p.61-63.

At the opposite extreme the doctor turns to his nurse and says, "Give this guy a shot of B 12," and to the patient, "Ten dollars, please." This is consumerism at its worst, in which the doctor, abdicating all responsibility, and denying his presumed expertise, betrays his patient.

Between these two is good medical practice. The doctor says, "Tell me why you say you have tired blood. Let's find out what is really wrong with you, and decide together what to do about it." This is the beginning of a working alliance.

To be sure, this paradigm is far simpler than the reality of parents and professionals coming together and eventually overcoming the suspicions, rivalries and defensiveness that almost always exist as the foundations are laid and work progresses on building the working alliance. We see the Child and Family Service Councils and the parent policy committees as the essence of constructive programming, but from experiences we have ourselves had, and other experiences reported elsewhere, we are apprehensive lest these Councils and committees be mishandled, or even manipulated, to destroy the whole dream.

There are friends of mine whose response to the consumer membership in the Councils has been that this whole proposal is nothing but a crude, cynical political gesture towards children with the fuse of its own destruction built in and lit. We in the New England Children's Mental Health Task Force do not believe this is the case, but we do know of instances where the "consumer" partners in similar councils used the setting to attack the "professionals," and the latter, forgetting what, as professionals, they should have known, responded with a declaration of war which destroyed the whole project, and the children who were supposed to have been the beneficiaries were once again victimized.

School systems have been a prime proving ground for the working alliance. At the Durham Conference, Dr. David F. Allen described some of the implications, problems and possibilities. Among other things he said,

> "The working alliance between parents, school and community may be . . . defined as the relationship which makes it possible for all parties, even including the student where possible, to work together in the most constructive manner to provide the best quality of education for all children."
>
> "As in the psychotherapy relationship, the working alliance in education demands mutual acceptance of and respect for the personhood and human dignity of the parties concerned. It requires an atmosphere of trust reinforced by the major constitutive imperatives on which all the other laws of human society are based: non-injury, truth-telling, promise-keeping and fairness (justice). Above all there must be what Lawrence Kohlberg calls the principle of reciprocity (the Golden Rule). In practice this Law of Reciprocity allows role interchangeability and enhances the process of empathy. Empathy is the ability to project oneself into the feelings of another and yet still be oneself. The result of this should be to treat the other as one would want to be treated. This requires a recognition of the other person's desires to be loved, understood and respected as felt for oneself."
>
> "It is important that a mutual educated awareness concerning the roles of the professionals and parents be developed in order to facilitate the process of a working alliance. The professional must realize that the parent brings to the alliance an in-depth and experiential knowledge of his/her child; vice-versa the parent must respect the ability of the professional in his/her shpere of technical competence. This takes time, patience, mutual respect and understanding. The fact remains that in a true alliance there must be equal input into the decision-making process."*

Because we are convinced that participation of parents and other consumers together as equal partners with "professionals" is vital in achieving the goals of this Act, and because we know that it is not easy to overcome mutual ignorance, suspicion and defensiveness to forge an effective working alliance, and finally, because there is knowledge of ways in which the formation of a working alliance can be expedited, we would like to suggest that the Secretary be required--or at least be specifically authorized--to develop and conduct demonstrations or in-service training programs on the working alliance--by whatever name it is called--, in order to avoid some of the unnecessary consumer-provider clashes that have so hurt other well-meaning programs in the past. A sentence to this effect could be added to Sec. 401 on Preservice and Inservice Training, and a similar one added to Sec. 402 on Technical Assistance and Planning.

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*Allen, D. F., M.D., M.P.H. The working alliance: parents, school, community. Proceedings of the First Annual Children's Advocacy Conference, Durham, New Hampshire, January 1975. pp. 162, 169.

We do not claim to have invented the concept of the working alliance, nor to be the only ones with skill in developing working groups, but there is expertise in this area in the New England Children's Mental Health Task Force, and if the Secretary should desire those of us who have this knowledge and skill would be honored to share it in any way possible.

3) The rights of children. The basic principle of the working alliance, you will recall, is that in so far as possible an individual who is going to be affected by a decision should have an opportunity to share in making that decision. Dr. Allen described the working alliance in the school situation as "the relationship which makes it possible for all parties, even including the student where possible [my emphasis] to work together. . ."

Obviously, with special emphasis given in this Act to children under five, they are not going to have much opportunity to decide whether or not they want to go to nursery school--although I suspect most small children would decide pro--, or whether or not they want shots against diphtheria, whooping cough, etc.--most toddlers would, I suspect decide con. Older children, however, are also going to be eligible for some services, and certainly they should be given some appropriate opportunity to learn how to make decisions affecting them.

We are very enthusiastic about the rights assured parents in this Act, but we would like to see some rights also assured to children. Specifically, in Section 2 (2)--page 2, line 3--, and in Section 106 (b)(1)--page 25, line 1 --, where the rights of parents are most clearly specified, we suggest the wording be modified to read that services will be provided only to or for children whose parents or legal guardians request them, or for children twelve years of age or older who themselves request them.

Similarly, in Section 504 (b) and (c)--page 60--we would like to suggest that informed consent must be obtained from children twelve and over in addition to the informed consent required from his parent.

4) Monitoring. To explain exactly what we mean by monitoring I quote again from a paper given at last winter's Children's Advocacy Conference. Dr. Jane Knitzer said:

> "Monitoring efforts have thus far not been used to reorient our child-helping service delivery systems that now so often drain a family of its energy and capacity to care for the children. We must use monitoring efforts to create tryly family centered services. We have a long way to go. It appears that we are now willing to expend funds most readily to destroy a family, least readily to keep it together. The examples of this are legion; children needlessly enter foster care for want of a homemaker; we pay expansively for children whose families are on AFDC to get help in residential treatment facilities but provide no funds for the same child to be in a day facility if this is more appropriate. The kind of monitoring system I am talking about would insure that at the minimum:
>
> a) "helping" systems do not lose individual children once the children are receiving services from one or more systems;
>
> b) "helping" systems are required to demonstrate concrete efforts to help individual families to remain together or in contact with the children if the children are out of the home, and to organize program, staff and funds so this is possible in reality, not merely in brochures.
>
> "Furthermore, any monitoring strategies in behalf of children, not bureaucratic efficiency, must incorporate the principles now being hammered out in the courts and in new statutes regarding a) protecting the rights of children and families to privacy, to freedom from useless labelling and to respect for their ethnic and cultural heritage, b) insuring children have access to the services they need, and c) insuring that individualized plans are made for children and that there are periodic assessments of both the children and the plans for them."*

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*Knitzer, J., Ed.D. Banishment and child advocacy: "Do you know where your children are?" Proceedings of the First Annual Children's Advocacy Conference, Durham, New Hampshire, January 1975. p.87-88.

Measured against this standard we feel that the provisions for monitoring in the Act (Sec. 103 (a)(1)(E); Sec. 201; Sec. 203) could be greatly strengthened. The first step would be to insure the effectiveness of the Child and Family Service Councils. Responsibility for monitoring programs might well be added to their specified duties. (Sec. 104 (a)(6)--page 15--, and Sec. 105 (b)(3)--page 24.) Parent participation in monitoring could be written into Section 106 (b) (9)--page 27, line 1-- as an addition to the requirement that parents participate in the conduct, overall direction and evaluation of programs.

The most effective monitoring technique on behalf of children, however, is that suggested by Dr. Knitzer: requiring that an individual plan be made for every child. We should like to suggest that all programs applying for support under Section 107 be required to state that they will make an individual plan for every child to be served by the program. The content of such a plan cannot be spelled out in law or even in regulations. For some children it may be very simple, for others very complicated. And simply making a plan does not guarantee either that it will be a good one or that it will be followed, but it does focus attention on the need to look at each child as an individual, and it provides a basic way to find out whether that has been done. It is a minimal safeguard against children getting lost in the mazes of bureaucracy.

* * *

In closing I would like to thank you for permitting me to testify on behalf of the New England Children's Mental Health Task Force. To repeat what I said in opening, although we wish there were more explicit reference to the mental health of children in this the Child and Family Services Act of 1975, nevertheless we see it as potentially the most significant child mental health legislation ever to be raised in Congress.

We hope that with minor modifications this Act will be passed and adequately funded. If it does we pledge you our support to help make it work the way its sponsors so obviously wish it to work.

June 20, 1975
ejm/j

Mr. CORNELL. Mr. Blau?

STATEMENT OF THEODORE BLAU, CHILD PSYCHOLOGIST, ASSOCIATION FOR THE ADVANCEMENT OF PSYCHOLOGY, WASHINGTON, D.C.

Mr. BLAU. Mr. Chairman, being mindful of the rapid approach of the lunch hour, I will be brief.

I am a clinical psychologist in practice in Tampa, Fla., where since 1952 I have examined and worked closely with over 5,000 children and their families and their grandparents and uncles and aunts and teachers.

I wish to say that American psychology supports the Child and Family Services Act. We support it, because it is needed, it is useful and it could make an enormous difference in the lives of thousands of children. The destiny of children does not reside solely in their genes. Prenatal and postpartum care make a difference. Preschool programs make a difference. Variations in the quality of schooling make a difference. And most of all, family relationships make a difference.

I would like to bring to you some significant citations in terms of psychological research during the past 40 or 50 years, the psychological importance of what you are doing following what we learned about children and families.

Dr. Abraham Maslow has pointed out that a child needs to learn under conditions of safety, regularity, dependability, routine, and performance.

Professor Carl Rogers suggests that the very young child must learn and experience success in coping in order to deal with change as an adult. A safe, comfortable environment where cognitive and affective learning opportunity exist can accomplish this.

Professor Harold Bernard of Oregon State University points out that replicated research indicates strongly that the urgent lessons of love and success are learned through cognitive experiences and emotional options during early childhood education. Programs which also involve the family through decisionmaking, participation, and training are the most successful. Such combined programs would be supported by H.R. 2966.

Parents cannot be replaced by day care centers. As Dr. Margery M. Larrabee has demonstrated, when parents participate in day-care activities the children involved build a stronger sense of identity. H.R. 2966 specifically insures and supports the strengthening of the family role.

Drs. Risley, Reynolds, and Hart have demonstrated at the Turner House School in Kansas City that carefully developed day care and preschool experiences for disadvantaged children can reverse trends toward unsocialized behavior and personal inadequacy. Working with children who demonstrated little or no speech, interest, or social interaction capability, these psychologists, using responsive school environments, have helped children enter paths of learning and responsibility that will help them to function both as individuals and responsible adults.

Similar demonstration projects reported by Dr. Ervin Staub indicate that early childhood education at well developed and supported day-care centers allow children to learn and practice prosocial behavior—helping, sharing, giving.

Recent studies by psychologists Glidewell and Swallow show that one child in three in the elementary school will require some kind of emotional help.

The research of Dr. John Zacks suggests that many children who evidence problems in their school years can be identified quite early in the primary and preprimary level.

More recent studies by Norman, a psychologist, and his colleagues at the University of Minnesota show that children at risk for developing schizophrenia, the most serious, debilitating and costly of all mental conditions can be identified at an early age. Children who might become residents of State hospitals throughout the country can be identified, helped, and provided with safeguards through the kinds of service and parent training that would be provided by H.R. 2966.

Psychologist E. J. Anthony and his colleagues at the Medical School of Washington University have developed training and intervention methods that seem to significantly lower the probability of children becoming schizophrenic hospital cases as adults.

Psychological research and parent training has proven to be an effective tool in helping parents identify children at risk. With help parents are effective change agents in easing this risk of future maladjustment in children. Of great importance is the research of psychologist E. Chandler whose work indicates that intervention and prevention techniques can be taught to parents and paraprofessionals who have relatively little education. H.R. 2966 specifically supports the involvement of parents and the training of paraprofessional workers. Such procedures can head off much tragedy particularly for children of the economically disadvantaged who have heretofore had too little opportunity for early childhood education.

H.R. 2966 could be the vehicle for bringing these methods and techniques to the people. I would like, for a moment, to talk about funding and fiscal responsibility in respect to only one of the tragic results of too little opportunity in childhood. In my own State of Florida, for example, it costs the State approximately $5,000 per year to keep a patient in one of our State hospitals. It is estimated that this will increase and our figures indicate that the increase will be approximately 3½ percent per year.

Dr. Julian Davis, director of psychological services of the Florida State Hospital, recently reported data indicating that if one child is saved from State hospitalization by early childhood services such as would be provided by H.R. 2966, the 40-year cumulative saving to the State would be $223,000. Instead of being a one-quarter million dollar burden to the State, this child would become a self-sufficient, tax-paying citizen.

Total expected funding for this bill amounts to $1.8 billion. Through the life of the child and the ability to grow, to love, to work, and to share cannot be measured in dollars, concern for accountability and fiscal responsibility should be reflected in legislative deliberation. If this bill that you are proposing prevents only 10,000 children from entering mental hospitals—a very minimal number of children, considering the scope of the program—without considering tax paying capability and vocational productivity, it would mean a savings of almost twice the cost of the entire child and family services program.

Dr. Bettye Caldwell, reporting the significance of support for day care, points out that in Soviet Russia there has been a clear mandate laid down to offer children early training and experience so that they may develop as responsible citizens. At present, our American programs of support for day care and early childhood education are insufficient. What a tragedy should we win the race to the moon, but lose the battle for responsible citizenship.

In conclusion may I say that H.R. 2966 is, in the view of psychology, pro bona publica. Our 75 years of research, training, and application indicate that the direction being taken by this bill is very likely to have important positive results in the future lives of the children it will affect. Speaking for my many colleagues who daily see the children themselves, while young and malleable, then later as contributing, productive, caring citizens, or often as life's derelicts—thank you for your concern and work.

Mr. BRADEMAS. Thank you, Doctor.

We are going to have to take a little break. We have a vote on the floor. Be back in about 10 minutes.

[Recess.]

Mr. CORNELL [presiding]. Our next witness is Mr. Peagler, National Advisory Council on the Education of Disadvantaged Children.

Sorry to delay you.

STATEMENT OF OWEN PEAGLER, DEAN, SCHOOL OF CONTINUING EDUCATION, PACE UNIVERSITY, NEW YORK, N.Y., AND CHAIRMAN, NATIONAL ADVISORY COUNCIL ON THE EDUCATION OF DISADVANTAGED CHILDREN, WASHINGTON, D.C.

Mr. PEAGLER. Because of the delay I will be brief and I will not read the entire statement.

My name is Owen Peagler and I am chairman of the National Advisory Council on the Education of Disadvantaged Children, and with me is Mrs. Robert A. Wolfenheim, who is the executive director of the council.

We are concerned because it would be a valuable program to supplement the educational programs for children.

In view of the time I am going to perhaps start with a conclusion and then go back to one or two high points without going over the entire testimony.

Because title I has the responsibility to advise the President and Congress regarding the education of disadvantaged children, and since this program title I serves approximately one-third of the children who are eligible for its services, we are particularly concerned about any Federal legislation program to provide services and which perhaps can't deliver on those services which it sets out to do.

We are concerned particularly about the resources and the program of family services proposed actually getting to the people to be served. The council feels in the bottom line that the one-third of a billion dollars that is set up in the Child and Family Services Act of 1975 can probably serve more children and serve more families if it were used in a coordinated program using existing services. We feel that the one-third of a billion dollars with proper coordination and existing services—and we know you have heard this before—will impact families quicker.

We are concerned about the timelag that would be involved in this bill. We feel that with some coordination the existing programs could be pulled together. There has been some indication that this coordination can be done successfully. I think you have heard testimony from the Appalachian Regional Commission which was mandated by Congress to provide coordinated services, and it has been successful. We are concerned about the bottom line services.

We do feel that overall the goals of the legislation we absolutely support. The programs are needed. We are concerned about perhaps the possibility that existing programs might atrophy if a total new structure with a new pipeline is developed and the existing services perhaps are not maintained or are not coordinated. We have some concern as to whether a whole new system is needed and whether the moneys used in creating that system might better be used in making the old one work and work more quickly.

I have given a very brief overview of the written testimony. In the view of time and hunger pains, I will leave my statement at that.

Mr. CORNELL. Thank you very much

I noted you are the second witness today that suggested in effect the same thing about taking the funding of the third of a billion dollars and leaving it to programs already underway. I believe in your statement you mentioned Head Start for one followthrough. Obviously, that will be taken into consideration. You are the second witness to mention that.

There were a couple of other things which I noted that were in your recommendations here. I read correctly that you would allow for the participation of more service?

Mr. PEAGLER. Yes; that is correct.

Mr. BRADEMAS. And use the volunteer system. As I recall, earlier today we were told that in Michigan the family could decide where they wanted to put them.

What is the reason?

Mr. PEAGLER. The reason I am expressing the rationale as discussed on our advisory council last week is that the bottom line of the delivery service is who can do the best within the money constraints. In other words, who can do the best for the most reasonable amount of money. There is no reason that proprietary or profitmaking organizations should not have the opportunity to compete. We feel one of the reasons, if for no other reason, is that it will keep all programs.

There is this element of competition. All programs will constantly strive to develop the best service for the most cost-effective means and that is one of our basic reasons for having the profitmaking organizations there.

Mr. **Brademas.** Now, I don't know exactly what you have in mind in No. 1, when you talk about the money needed for the paraprofessional people. You say there should be a provision for training teachers in an already overcrowded field.

Mr. **Peagler.** I think there is some question on our part whether the preservice training as stated in the bill might be unlimited in the way it is stated and might be utilized for other than the development of paraprofessionals.

Mr. **Brademas.** Then you feel there should be clarification.

Mr. **Peagler.** That is right.

Mr. **Cornell.** One last thing, in the suggestion you have in relation to the bill, you have one word in allocation of funds for handicapped for low-income families in the event of funding cuts. I presume you are aware that our subcommittee has reported out legislation for the handicapped.

Mr. **Peagler.** That is correct.

Mr. **Cornell.** Of course, we face a situation, as you made note, of the fact that we are not sure we are going to get anywhere near that amount of funding. Hopefully we will.

Mr. **Peagler.** The question we have, though, is whether this legislation takes into account whether you don't get the money, if you don't get the money what are the priorities, what are the fallback points to which service then will be developed?

As you will note, our recommendation is that certainly this should be stated, and the disadvantaged families, economically disadvantaged families, perhaps ought to have that priority.

Mr. **Cornell.** What you are referring to is the handicap, of course, is rated on the percentage that the State has of handicapped children and then ratably reduced if there is not sufficient funding for it. I gather you think something like that ought to be incorporated.

Mr. **Peagler** That is correct. That is the approach we are suggesting.

Mr. **Cornell.** Thank you very much.

[The prepared statement of Mr. Peagler follows:]

NATIONAL ADVISORY COUNCIL ON THE
EDUCATION OF DISADVANTAGED CHILDREN

Friday, June 20, 1975

Testimony of Mr. Owen Peagler, Dean of the School of Continuing Education, Pace University, New York, New York, and Chairman of the NACEDC, on H.R. 2966 and S. 626, the Child and Family Services Act of 1975:

Good Morning. My name is Owen Peagler, and I am the Chairman of the National Advisory Council on the Education of Disadvantaged Children, a Presidential advisory council chartered to review, evaluate and make recommendations regarding all programs serving educationally disadvantaged children. Our fifteen members examine Title I, of the Elementary and Secondary Education Act and other programs to learn what approaches are promising and are helpful to disadvantaged kids. In addition to our annual report, the Council works to implement its recommendations into law, policy and practice.

The Council appreciates this opportunity to share with you our perspective on the Child and Family Services Act. We have a concern for strengthening family life and I would like to examine the effectiveness of this bill to foster the delivery of needed services directly to those who need them.

The Council believes that the provision of services to children and families must be approached in a comprehensive and coordinated way. Governments at every level have tended to compartmentalize and seperate the problems of family units, and the services designed to meet those problems. This approach has not been successful, although it has been perpetuated, in part, by the nature and structure of current federally-assisted child and family service programs.

The National Advisory Council endorses the need for federal involvement and assistance in the delivery of such services as parent education, screening for handicaps, prenatal services, in-home and center-based child-care, health and nutritional services, as well as others. These services have been shown to be necessary to the successful preschool care and preparation of children.

Existing federal laws and programs address these needs on a categorical basis. The Council recognizes the fact that in many communities, organizations exist to deliver these services in a highly acceptable and successful way. What is lacking is coordination between and among the providers of child and family services, at the local and state levels, and sufficient financial support from the federal government to make these services available to a higher proportion of those families and children who need them. The Department of Health, Education and Welfare has reported to this committee that 200 existing programs within this Department, currently funded at a combined level of $13.2 billion are currently serving children and families with various categories of services.

The Council's priority is on getting as much of the resources as possible directly to the children and families being served. The Council feels this can be best, and most effectively and efficiently accomplished by increasing the resources made available to existing providers of service, adding new providers only where needed, and by establishing a workable means of coordinating priority needs with available resources in each locality, county, or metropolitan area. We do not feel that the wheel needs to be re-invented, but that the parts of the existing wheel need augmenting, bolstering and reassembly. In the Council's judgment, the Child and Family Services Act exaggerates the need for the revamping and superceding of existing service delivery structures, and allocates tremendous resources for establishing new mechanisms -- resources that will not reach those in need of services. The provision in the bill for over a third of a billion dollars in the first two fiscal years for the purposes of training, planning and technical assistance seems to approach extravagance in light of the serious dollar constraints now imposed on programs designed to deliver services directly to people. Imagine the impact of this $350 million appropriation if it were added to Head Start, or Follow Through, to child nutrition programs, to service components of Title I programs, or to a host of other delivery systems already in place to serve children and families.

In addition to this objection, we fear the cost and the bureaucratic impact on service delivery that would result from the interposition of prime sponsors and voluminous federal controls and regulations between the providers of the money and direct providers of the services. To the Council, these superstructures detract from the excellent provisions in the bill for parental involvement in mandated Child and Family Service Councils, which could themselves perform a valuable coordinating role in states and local areas.

In addition to these general, and more serious observations on the philosophy and direction of this bill, we do have some specific comments and suggestions relating to various parts of the bill:

1. The provision which would provide support for teacher training could be interpreted to allow college scholarships for students desiring to become teachers in an already overcrowded field, instead of focusing these monies on the families to be served.

2. The Council strongly supports the parent involvement provisions which give parents a decisionmaking role in the goals and philosophies of the programs in which they and their families participate.

3. We believe there is great value to encouraging competition among those desiring to provide child and family services. We urge the committee to consider two possibilities not currently contemplated in the bill: allowing the participation of for-profit providers of service; and experimentation with vouchers which would be issued to families for the purpose of giving them free choice in the providers they would utilize, whether public, private non-profit, or private for-profit. This would diminish the isolation of low income children and families in government operated and supported facilities.

4. Finally, the Council encourages you to include a boilerplate section on ratable reductions to insure that the highest priority levels of need are met even in the event appropriations do not meet authorizations levels. In other words, the Council feels that the allocation of funds for handicapped and low income families should

be protected in the event of funding cuts.

The National Advisory Council completely concurs in your dedication to improve the quality, the quantity and the coordination of child and family services in this country. Your initiative in preparing and airing this legislation in comprehensive hearings has done more to raise the hopes of those seeking improvement in these services than any other government initiative in this decade. We are hopeful that this Congress will enact legislation that will take important steps toward the important human goals which both this Committee and the Council strive for.

As Council Chairman, I pledge the full cooperation of the Council and its staff with this Committee, should you seek any further information or suggestions in pursuit of improved child and family services.

Thank you.

Mr. Cornell. I understand we have a panel from New York City. They have been waiting a long, long time.

Ms. Lubin. Mr. Chairman, some of the panelists are downstairs, but I can start and we will have them join us as they get up here.

Mr. Cornell. I would appreciate it if you would introduce yourself and introduce members of the panel.

STATEMENT OF CAROL LUBIN, CHILD DEVELOPMENT SPECIALIST, UNITED NEIGHBORHOOD HOUSES OF NEW YORK CITY, ACCOMPANIED BY JAMES SOLER, EXECUTIVE DIRECTOR, UNION SETTLEMENT ASSOCIATION, INC.; AILEEN WITTENSTEIN, MEMBER OF THE BOARD OF DIRECTORS, UNITED NEIGHBORHOOD HOUSES OF NEW YORK CITY, ALSO FORMER PRESIDENT, SOUTH BROOKLYN SETTLEMENT HOUSE; JEANNETTE PERKINS, LOW MEMORIAL DAY CARE CENTER; ALICE LEE, DIRECTOR, AFTER SCHOOL DAY CARE CENTER, CHINATOWN PLANNING COUNCIL; ELEANOR BAILEY, BUSINESS AGENT, NEW YORK METRO AREA POSTAL UNION, APWU, AFL–CIO; EILEEN FOX, ASSISTANT URBAN AFFAIRS OFFICER, BANKERS TRUST CO.; AND HENRY SALTZMAN, EXECUTIVE DIRECTOR, CITIZENS COMMITTEE FOR CHILDREN, A PANEL

Ms. Lubin. I am Carol Lubin. I am representing the affiliated United Neighborhood Houses, which is the federation of the 36 settlement houses and neighborhood centers of New York City. These centers have operated quality child care programs ever since World War II.

We feel that we have been the real pioneers in providing direct services to children and supportive services to families. These programs include full day care activities, after-school programs, programs for the handicapped, and services for infants and toddlers, as well as Head Start programs.

In addition to this kind of program, a number of settlement houses operate family day care programs which are also related to centers. Almost all of the child development programs in the settlement houses are government-funded and they currently serve over 8,000 children.

The services to families and to the neighborhoods in general are greatly facilitated by the multiservice nature of the centers. The child care programs that are sponsored by the settlements provide the various components such as education, health, nutrition, and family services, including counseling, that are called for under the bill we have under discussion today.

I should add that UNH also operates a series of training programs for child care workers, funded by the Department of Labor, which are similar in concept to the training programs contained in the House version of the Child and Family Services bill.

We feel that our experience provides the model for the pilot projects, which some have suggested should constitute the first step in the implementation of the bill.

We would be happy to have our experience studied as part of the research component called for in the bill (sec. 302) because we feel that it is an example of coordinated provision of services, funded through different agencies and drawing upon varied community-based resources for total services to families and children. This flexible approach would not be possible if the school system was to be responsible for the funding as the presumed prime sponsor.

As the representative of UNH at this hearing, I shall limit the balance of my oral testimony to the introduction of the panel. We are also submitting written testimony dealing with a number of the specific issues to which we attach special importance. I should state that in general we support fully the concepts of the bill and in particular the concept of flexible and coordinated funding mechanisms.

Before introducing our first speaker on the panel, I call attention to the fact that a large number of participants of day care centers have by chance just come here and they are part of our constituency.

It is now my pleasure to introduce to you Mr. James Soler, who is the executive director of one of the largest settlement houses in New York City, serving through its four day care centers and a Head Start center large numbers of persons living in East Harlem.

Mr. Soler.

STATEMENT OF JAMES SOLER, EXECUTIVE DIRECTOR, UNION SETTLEMENT ASSOCIATION, INC., NEW YORK, N.Y.

Mr. Soler. My name is James Soler. I am the executive director of the Union Settlement Association, Inc., a private, not-for-profit settlement house serving the East Harlem sector of New York.

East Harlem is sometimes referred to as "el barrio" or Spanish Harlem since approximately 45 percent of the 156,000 residents of the community are bilingual Puerto Ricans. Approximately 35 percent of the population is black. East Harlem is one of the major economically depressed urban core areas of our Nation.

I am pleased to have this opportunity to testify before this joint committee on a bill of such critical importance to the lives of children and families in East Harlem.

The experience of Union Settlement in serving needs of low-income children and families dates back to the founding of the settlement in 1895. Union Settlement started as the sponsor of private, nonprofit day care services in the mid-1930's, before Government funding was introduced.

The settlement sponsored its first publicly funded day care center in 1941. At the present time Union Settlement is the sponsor of four publicly funded day care centers and one Head Start center. We have approximately 600 children, ages 3 through 11 years, and 500 parents participating in our early childhood program.

Union Settlement operates its day care and Head Start programs with a budget of approximately $1.6 million, of which approximately three-fourths comes from the Federal Government.

The staff of the Union Settlement engaged directly in day care and Head Start total 136, of which 57 are local residents; 75 percent of the staff are members of minority groups, including 40 bilingual workers. Each of the directors holds a post-graduate degree.

Union Settlement has used its own financial resources and volunteers to provide our children and parents with professional psychological consultations.

Four years ago the Settlement worked with parents and community leaders to develop the newest of our four day care centers in a low-income public housing project.

Many of the settlements in New York City, including Union Settlement, and throughout the Nation, function as multipurpose service agencies. The children and families in our day care centers are provided with additional services and support through the programs that we offer in: medical and health consultations, high school training for adults, recreational and cultural activities, college readiness for adolescents, and job training and placement. In fact, we have trained early childhood workers at Union Settlement.

I have come before you to speak in support of the Child and Family Services bill. I believe that the bill is properly cited in combining the needs and interest of children and their families. Programs and services aimed at the growth and development of children should attempt to improve, support, and reinforce the prime adult relationships of children.

I particularly want to speak in support of certain provisions of the bill, namely:

One. Flexible funding whereby financial assistance shall be provided to prime sponsors and other public and I stress—private nonprofit agencies and organizations. The prime sponsor position I believe is critical, it should be kept flexible. I want to make an urgent plea that this committee avoid making the board of education the sole prime sponsor.

Two. Funding for the special needs and circumstances of bilingual children, migrant families, and ethnic minorities to meet the need of all children to understand and appreciate history and cultural background.

Three. Preservice and inservice education and training for professional and paraprofessional, including parents, and volunteers.

Four. The requirements for parent participation in development, operation and evaluation of programs.

Five. The allocation of funds which are weighted toward local areas with higher proportions of young children and working mothers and single parents.

Six. That contracts for the operation of programs through public and private nonprofit agencies or organizations shall be entered into only if previously approved by the local program council.

Seven. That the Secretary may fund directly a public or private nonprofit agency to carry out model programs especially designed to be responsive to the needs of economically deprived, minority group, or bilingual children and their families.

Eight. The provision allowing for the free choice by parents for the participation of the children in the services. I think it is particularly important that a social service department should not require a parent to put a child in day care to be eligible for public assistance.

There are approximately 700 to 800 settlements across the Nation. Almost all of them are located in large urban areas. Many of these settlements are experienced and qualified to meet the needs of children and families for day care service, especially bilingual, migrant, and minority families.

Union Settlement, by nature of its physical location, its long history and trust in the community, the composition and training of its staff, and the comprehensive scope of its services, is effectively relevant to ethnic, educational, and bilingual day care needs of Puerto Rican and black children.

Many of us are deeply concerned over the possibility that day care services in New York City may come under the jurisdiction of the local board of education and community school board.

If in fact day care should come under the jurisdiction of the board of education, it is clear to us, based on our observations, experience, publicized reports, and newspaper accounts, that the quality and effectiveness of the educational experience for children would decline and become inferior, the physical security of our children would be endangered, and the bureaucratic weight of the New York City Board of Education would stymie the administrative, fiscal, and managerial functions of day care operations.

Finally, one might find a conflict of interest developing in New York City since the public school teachers' union in this city is reported to be heavily engaged with personnel and money in the election of its own members to the local community school boards.

I suspect that many of the pitfalls and risks that would develop by putting day care services under the board of education in New York City would probably occur in other large urban core areas of the Nation.

In conclusion, I have spoken in support of H.R. 2966 particularly those provisions dealing with flexible funding to include nonprofit private organizations; funding for bilingual programs and the needs of migrant and minority children; preservice and inservice educational opportunity for staff at all levels, including professional, paraprofessional, and parents and volunteers; the requirements for parent participation in developments, operations, and evaluation; the weighted allocation of funds toward areas heavily populated with young children and working mothers; and the conduct of programs in research and demonstration projects.

I have reviewed the experience of settlements as the sponsors of day care services especially qualified to meet the needs of children of bilingual, migrant, and minority families.

In addition, I have expressed my deep concern over the pitfalls and risks that will develop should day care be allowed to come under the jurisdiction of the Board of Education in New York City.

Finally, I would like to suggest to the Joint Committee that it seriously consider the proven track record of effective work by private, nonprofit settlements in day care services as a major model for the sponsorship, administration, and program in day care services for the large urban communities of this Nation.

Thank you for your time and kind attention.

Ms. LUBIN. It is now my pleasure to introduce Mrs. Aileen Wittenstein, a member of the board of United Neighborhood Houses. She is a former president of the largest settlement house in Brooklyn and is active in working with a number of child care centers in the Brooklyn area, one of which is the first day care center in a relocation center.

She has also had the experience of serving as representative of United Neighborhood Houses on the Child Development Commission of New York City and therefore will talk to the council structure.

Mrs. Wittenstein.

STATEMENT OF AILEEN WITTENSTEIN, MEMBER OF THE BOARD OF DIRECTORS, UNITED NEIGHBORHOOD HOUSES OF NEW YORK CITY; FORMER PRESIDENT, SOUTH BROOKLYN SETTLEMENT HOUSE

Mrs. WITTENSTEIN. I appreciate the opportunity of appearing here today. I applaud the bill's recognition of the value of child and family service councils and its comprehensive concept for implementation of such councils at prime sponsor level as well as at local level.

From my experience in serving on both levels, the Child Development Commission of New York City and working with several local parent advisory boards, I am taking the liberty of making several recommendations in regard to strengthening and clarifying this section.

The written statement submitted to the committee provides a detailed examination of this section. My remarks today will be somewhat more general in nature.

Section 105, subsection 2: To assist the council in working at optimum productivity, I would suggest that it be kept small in its number of members, thus allowing participants to get to know each other and work more closely together. I also recommend against setting of participation percentages for any group as it immediately creates too much rigidity.

I am particularly concerned about the nonparent members who are to be chosen by the prime sponsor to represent a broad spectrum of public and voluntary agencies. Too often, vested interests and politics enter into these choices, and inadequate representation is given to those directly involved and knowledgeable in child and family services.

I would recommend that this section read that representatives of all agencies directly concerned with child care be selected, to include the health department, licensing agency, sponsoring agencies, and sensitive professionals teaching early childhood education.

Subsection b: The duties of the council are not only too broad in scope but also impractical and unrealistic to all be in the domain of the council. I would suggest that the council's responsibilities be concerned with policy issues and not operational procedures and decisions. For example, "project funding" is allocation of funds and is an administrative job.

In addition, an ongoing evaluation of administering agencies is an impossible task for the council. However, they could be responsible for a review of programs with the Secretary responsible for seeing that evaluation takes place and determining what criteria should be used.

It should be kept in mind that criteria should take into account the diversity of regional needs, particularly the differences between urban, suburban, and rural areas.

Section 107, subsection b: In connection with the setting up of local parent advisory committees, I would suggest that the member to be chosen for particular skills in child care be made the nonvoting chairman of the committee. This would afford the local council the benefit of professional guidance without taking away from any parent authority.

The responsibilities of the local councils are too broad and unrealistic. Many of them are administrative and should be the task of the sponsoring agency. Many of New York City's settlement houses have day care parents represented as voting members on their board of directors, thus assuring parents a governing role in the policies of the sponsoring agency.

I suggest this procedure be considered for all sponsoring agencies as a viable means to provide parents with the mechanism for input into their day care programs. It also provides parents with the training and learning opportunities, and the responsibilities of a board member.

I strongly support the Child and Family Services bill and hope for its immediate enactment. It really provides for the comprehensive services we have all wanted for our country's children.

We are confident that in the final draft many of the suggestions made by this panel representing United Neighborhood Houses of New York will be taken into consideration.

Ms. LUBIN. The next speaker on our panel is Mrs. Jeannette Perkins, mother of three children, two of whom have benefited from the services provided by the Low Memorial Day Care Center in Brooklyn. Her youngest child has graduated from the program and is now successfully coping with second grade in public schools.

The younger, a severely retarded child, is currently being served by the special program for the retarded at the day care center, which provides the first pilot day care program for retarded children.

Mrs. Perkins.

STATEMENT OF JEANNETTE PERKINS, MOTHER OF CHILDREN FORMERLY ENROLLED IN LOW MEMORIAL DAY CARE CENTER

Mrs. PERKINS. Thank you.

My name is Jeannette Perkins and I am most grateful to the committee for asking me to speak here today.

I am the mother of 3 children: Kevin, 11; Towanna, 7; and Kerron, 6. My 7-year-old daughter Towanna is mentally disturbed.

My youngest child, Kerron, is a graduate of Low Memorial Day Care and is presently at the top of his class in second grade in public school. Towanna, my middle child, is a participant in the special program for retarded children at Low Memorial.

When Towanna was 2 years of age, my family and friends brought to my attention that Towanna was not functioning and developing on the level of a child her age. I immediately consulted my doctor, who referred me to Brookdale Hospital, where she was diagnosed as autistic.

Faced with this serious problem, I began to pursue day care facilities for her, which proved to be a very difficult task. There were no day facilities that would accept my daughter in the more than 15 services I explored. It was indeed a blessing that I was told of Low Memorial's Pilot program, which received Towanna most willingly.

In the 3 years she has been a participant in this program, Towanna has developed and improved immeasurably. She now feeds herself, knows what the bathroom is for, and is considerably less hyperactive.

Through this highly professional program I have learned how to work constructively at home with Towanna and have shared this knowledge with our entire family. Needless to say, this has greatly strengthened our family life in every way.

While Towanna was in Low Memorial Day Care it gave me the opportunity to continue my education. I attended New York City Community College and majored in special education. I am very proud to say I received my A.A. degree June 13, 1975. Without this program this would not have been possible.

While studying, I was chosen to be the recipient of a scholarship grant which enabled me to study in several African countries last summer. During my stay there I was a volunteer/teacher working with retarded children in Ghana. The director was so impressed with my knowledge and skills that he offered me a permanent position in the program. Unfortunately, I couldn't accept, but I was very pleased to be asked.

In September I am enrolling at Brooklyn College to continue my studies in the field of special education. If the day care facilities are cut, I will be forced to remain at home with Towanna. This would be a great injustice to both of us.

I could not possibly begin to say how important provision of day care is for our handicapped children and their families. It is indeed gratifying to know that this bill recognizes the value of such services and I know I speak for all families faced with these problems in expressing deep appreciation for the comprehensive provisions made in this bill to meet the needs of such children.

Ms. LUBIN. I shall now introduce to you Mrs. Alice Lee, who is the director of an after school day care program which has operated in the facilities of a public school but is sponsored by a settlement house, the Chinatown Planning Council.

The council sponsors seven day care centers as well as providing the other supportive activities of a multipurpose center.

Mrs. Lee will talk about the special problems of bilingual children and families and the way their needs would be helped with the enactment of the current bill.

Mrs. Lee.

STATEMENT OF ALICE LEE, DIRECTOR, AFTER SCHOOL DAY CARE CENTER, CHINATOWN PLANNING COUNCIL

Mrs. LEE. Since 1965, New York City's Chinatown has grown from 29,000 to 65,000 individuals, with the great majority of them arriving from Hong Kong, Taiwan, and other parts of Asia. This has created a tremendous need for bilingual services both for the parents and children.

The Chinatown Planning Council After School Day Care Center is specifically concerned about the needs of new immigrant children in this area. We, therefore, consider the bilingual program as one of the most essential parts of the day care program.

In my center, which is located in the heart of Chinatown, 100 percent of the student population is Chinese; more than half of the children are non-English speaking. And 97 percent of the families are new immigrants.

TUTORIAL PROGRAM

The major part of the tutorial program is homework help. Before the children can catch up to their reading levels, homework help through tutorial reinforcement in different subject areas conducted in their native tongue is especially essential for those who have difficulty in mastering English.

REMEDIAL ESL CLASS FOR NON-ENGLISH SPEAKING CHILDREN AND SLOW READERS

The bilingual approach, utilizing concrete teaching materials and situations, is especially helpful for new immigrant children. Children participating in this program receive individual and/or small group instruction 3 to 5 times a week.

BILINGUAL AND BICULTURAL ELEMENTS

Chinese lessons are given 2 to 3 times a week about 30 minutes per session. Folklore, folksongs, festivals, customs, and traditions are incorporated into the lessons.

Our parents desire that their children retain their mother tongue in order to help them to communicate at home, insofar as the parents are non-English speaking. Children are also encouraged to speak Chinese in the center. They are taught to respect and be proud of their identity, which is the first step in preparing them toward adjusting and assimilating to their new society.

When we started this program 6 years ago as an experiment, we had only 40 children; within these 6 years, our enrollment has grown to over 700 children, with over 800 children on the waiting list, without any advertising. From this, you can see the value and need of the After School Day Care program.

In Chinatown, everyone who is able to work, works. The traditional pattern is for the father to work in a food-related business and the mother to work in a unionized garment factory as a seamstress. The average combined wage is $7,000 to $12,000 a year because of the seasonal nature of the work.

The program serves the following purposes:

One: After 3 p.m., the school-age children have a safe place to stay, in a basically unsafe and crowded neighborhood, under creative professional guidance.

Two: Within these few hours, the children have a chance to be helped in learning a new language—English—which is the dominant language in this country, and by the same token they also have the chance to learn their own culture and language.

Three: Services to the families. The parents do not have to worry about their children after 3 p.m. They can put their minds to rest knowing that their children are receiving excellent care and guidance away from the crime and fire-prone tenements.

This enables them to remain gainfully employed and helps them to move up the economic ladder, contributing to our country's resources.

When a child comes from another country or place in which their mother tongue is other than English and is placed in a school where all the subjects are taught in a language they do not understand, they lose their communication facility and feel afraid, frustrated, and insecure.

This kind of situation applies not only to the Chinese but also to all ethnic groups, such as the Polish, Spanish, Italians, Jews, Greeks, et cetera. The only way we can help them is through provisions in new child and family service bills.

Thank you on behalf of the Council and United Neighborhood Houses for allowing us to testify.

Ms. LUBIN. I am now going to introduce to you Miss Eleanor Bailey, who is the business agent for the Metropolitan North Postal Workers Union for the AFL-CIO. She will testify from her own experience about the varied needs of the working women based on a study she did of women postal workers.

STATEMENT OF ELEANOR BAILEY, BUSINESS AGENT, NEW YORK METRO AREA POSTAL UNION, APWU, AFL-CIO

Ms. BAILEY. My name is Eleanor Bailey. I am an officer of the New York Metro Area Postal Union, APWU, AFL-CIO; our local has a membership of 26,000 postal workers.

My presence among this New York delegation is to bring to this committee's attention a facet of child or family care service that isn't usually discussed or thought about—one-parent families, dual-working parents with families, and unmarried heads of households making salaries of about $7,000 to $12,000. They work in an industry which offers service to the New York and American public 24 hours a day and 7 days a week, including holidays.

Beyond my duties as an officer, my first job is that of being a steward to my coworkers on the midnight tour in the General Post Office, New York, N.Y.

An influx of young family people were introduced to the Post Office under the Executive order by John F. Kennedy; they were looking forward to the security of Federal employment, but the myth was short lived.

I am sure this committee has heard of the terms "latchkey" or "string around the neck" children. Well, our members would like to add a new dimension, "10-12-year-old heads of the household."

Can you imagine trying to give your loyalty to a job you work downtown and home is uptown with the "head of the household" in charge? Particularly in a city when fires occur every 4 minutes and homes are being burglarized every 3 minutes—note this: in the ghettos they get ripped off every 2 minutes.

Our newest members have little seniority, so therefore are assigned to the nighttime or midnight tours of duty; starting time could be anywhere between the hours of 3 p.m. and 12 midnight. In the last 4 years, the Postal Service has seen fit to increase nighttime work over daytime work, so that means practically 70 percent of our people work during nighttime hours.

We all know of the lack of child care service available to those working the 9-5 shift, so in your wildest dreams you cannot imagine what the workers have to do to obtain nighttime care.

First of all, most of the sitters insist on the child or children being brought to their home. So, in rain, snow, heat, or hail, you transport the family by public conveyance or cab. If they come to your home, their fare must be paid.

The fee for this custodial care runs from $35 to $75 per week, and all expenses such as food, entertainment or changes of clothing are borne by the parent.

Babysitters are only human. They get sick. They like to date. They get bored with babysitting. So, when the sitter fails to show, there is no way out. Call the station and stay home with the children. What else?

Yet on their return to the job, this person is charged with being AWOL—absent without official leave. The Postal Service calls it "personal business." It is an insult. A proper charge would be love, or family devotion. Calling in too many of these "personal business" sets up a parent for weeklong suspensions or removal from the Service.

Believe it—loyal, hardworking folks being punished for daring to take care of a prime responsibility when an emergency occurs.

Can you imagine that Federal management not wanting these workers to remain as productive members of the community, taking care of their families and adding to the tax rolls instead of the welfare rolls?

A survey was conducted among our members as to their needs for family service. The results showed the majority obtained outside people as their prime source of sitters, parents second, older children third, other relatives fourth, and community facilities a very poor fifth.

Most of them took their families outside their homes for such care. Charges were from $20 to $75 weekly and are paid bimonthly. Ratings of these services were "not very satisfactory" to "no other choice."

These findings were eventually presented to the New York City Child Development Agency and after a year of discussion, cajoling, and plain pressure, a pilot program of ten 24-hour centers was finalized. We were to utilize existing ones. All that was needed was the big money from the Federal Government.

Well, a man by the name of Richard Nixon took care of that. He convinced Congress and a lot of American people that it was a disgrace to have young families cared for by total strangers during their formative years.

In 1973, the Postal Service along with four other private firms in New York City were part of the survey conducted by Peat, Marwick, Mitchell & Co., under the sponsorship of the Women's Bureau of the U.S. Department of Labor and Day Care Council of New York.

My results could have saved them the time and money, because—and they admitted it—the only postal people they interviewed were the supervisors and office personnel who worked the day shift, 8 to 4:30.

I agree with this Child and Family Service Bill, H.R. 2966, especially those parts which reiterate parent and community participation. Also dissemination of all information to the public concerning the administration, planning and training of personnel for any facilities.

Our members, through the survey and vocally, have shown that they are willing to give their time and money to centers which will allow them peace of mind about their children's well-being.

These services should and need to be the right of every person who wants to utilize them. There should be only one qualification necessary: "want or need."

Only you and our other congressional leaders can help the working parents to maintain their right to hold a job with dignity and peace of mind. That's what child and family service centers can and must do.

Thanks very much for the opportunity of testifying today.

Ms. LUBIN. The final speaker on our panel is Miss Eileen Fox, assistant urban affairs officer of the Bankers Trust Company, who has a particular responsibility, special projects in day care. She will speak to both the need for seed money in the construction of day care centers—a need to which the bill addresses itself—and will indicate the concern and willingness to cooperate in extending day care by banks and other members of the business community.

Eileen Fox.

STATEMENT OF EILEEN FOX, ASSISTANT URBAN AFFAIRS OFFICER, BANKERS TRUST CO.

Ms. FOX. I will summarize my written statement which is also appended to the material you have received.

Bankers Trust Co. is a major commercial bank employing 10,400 workers in the New York metropolitan region. Women comprise 51 percent of our work force; minorities, 38 percent. The average clerical salary is $9,800.

It is estimated from computerized personnel records that 1,300 bank employees residing in New York City have children under six years of age. Today bank support for child care programs is an aspect of the bank's commitment to career opportunity for women and minority employees.

For these reasons over the last 5 years the bank has developed a concern for employee child care needs. Bank strategy for involvement has four elements: one, loans for facility development; two, contribution support to nonprofit community child care providers, technical assistance, and day care advocacy groups; three, individual counseling and intervention on behalf of employees with child care problems; and four, development of a consistent and informed public position on governmental actions concerning child care as they potentially impact Bankers Trust employees.

In sharing our experience at Bankers Trust both as a lender and employer, let me stress, however, that the bank has neither expertise in providing child care nor the intention of developing it. There are many aspects of the legislation such as standards and staff ratios which I do not feel competent to testify about and which the committee will have to rely upon others for assistance in framing the language and standards of the bill.

Because Bankers Trust believes the most appropriate response for a financial institution is the development of loan policies which would increase the supply of available spaces at the neighborhood level, it became involved in three different types of loans:

One. Conventional real estate loans represent most of the lending of our and other banks for child care facilities. Commitments of the bank and its real estate affiliate have totaled $14.3 million and represents development of 26 centers through the period 1969–1974. This is a market rate program, but where the borrower was a nonprofit group, the members of which might literally paint the walls of a day care center themselves in order to shave construction costs, the bank extended financing at preferential rates. Real estate developers with clear title to the property obtain a long-term direct lease commitment from the city government which assures income to the property and facilitates conventional financing. Usually construction financing is provided by a commercial bank and a mortgage by a savings bank or insurance company. A shortcoming of the direct lease program is that it generally does not result in community or municipal ownership of the facility despite large lease payments over time. If additional Federal money is to be made available for the physical development of child care under the proposed legislation, officials could benefit from comparing the experience in New York of the direct lease procedure and the State loan guarantee program described below.

Two. The Youth Facilities Improvement Act was created in 1969 to encourage community-based ownership of day care centers. Seed money, development costs, and mortgage financing were to be made available to qualifying nonprofit groups. Financing might be made directly through State bond issues up to $100 million or indirectly through private lenders who received a 90-percent guarantee on loans made at a fixed interest ceiling imposed by the State. Although this program brought the promise of expanded community child care facilities to hundreds of potential sponsors it was encumbered with procedures, inadequate appropriations, and unresolved difficulties between respective city and State agencies. The program was not attractive to lenders for many reasons. The arduous approval process resulted in inflationary delays requiring frequent plan revisions. The long term and low fixed interest rate was not realistic in times of rising market rates. Nevertheless some banks including Bankers Trust attempted to work with community day care development groups seeking loans. We committed a total of $1.7 million and advanced unsecured seed money loans of $5,000 to $14,000 to three groups. I must report, however, that although we have renewed our loan commitments several times, it is unrealistic to expect that any of these loans will close. In the absence of assured operating funds from public agencies, the necessary governmental approvals will not be forthcoming. It is impossible to express adequately the years of toil and frustration these and a hundred other groups have encountered in vain. The infusion of Federal money could make possible the operating of day care programs in residential neighborhoods where center-based care is badly needed.

Three. Parent co-ops and day care groups operating out of storefronts and other found space need assistance in making renovations to remove major code violations or to purchase required equipment in order to meet licensing requirements. The groups may be catering to income eligible families or others just above the income guidelines, but the city's agency for child development lacks the funds to reimburse all the groups. There may be 50 to 100 storefronts which need renovation assistance, in some cases requiring expansion or alternate sites.

To summarize the present state of affairs, financing of child care centers has all but dried up in New York, with groups frozen out of funding or struck in the approval pipeline.

Bankers Trust endorses the view that enriched child care programs supportive of family life are needed by many employees as a solution to their family and employment problems. The stigma of an institutional setting for young children who would better be cared for by their mothers at home is yielding to increased understanding of the developmental value of early education and to the economic reality of the urban worker.

The following recommendations reflect the concerns of the bank with respect to the proposed child care legislation:

One. Funding for child care should encourage diversity in neighborhood based programs which continue to serve families as their children advance in age and their incomes rise.

Two. Eligibility should be based on a realistic accounting of net disposable income and should provide liberal allowance for work-related expenses.

Three. Facility development funding must provide seed-money advances, appropriate guarantees within an expeditious approval process with due regard for market interest rates, if the private sector is to participate in financing.

Four. Adequate provision for information and referral services at the neighborhood level must be made to increase access to services and to encourage cooperation among individual programs.

Thank you for the opportunity to address the hearing.

Ms. LUBIN. In concluding I would like to call attention to our written testimony which deals with a great many of the issues which were raised today by previous speakers both with respect to the type of funding, the eligibility and fee scales, the need for Federal standard setting and effective licensing procedures and the role of private agencies.

We particularly are concerned with the need for close coordination in programs, not only with the new programs under title 20, but also with the whole area of the kind of programs that can be funded for day care.

I would just like to add one point which grew out of the testimony available under title 20 for child care. That global figure has meant this morning when we talked about the $2.5 billion that might be very little to States like New York State which are caught in their much more limited piece of the amount, and that $2.5 billion is not for day care; it is for all of the services that are needed, and if it all went to day care we would lose a great many other kinds of family services.

Thank you.

If you wish to question any of us, we are available.

Mr. CORNELL. The staff has prepared a few questions. If I might take a couple minutes recess, I will be right back.

[Recess taken.]

Ms. LUBIN. We strongly support the idea that their teachers and workers should have available to them the same training material and possibilities that are provided for in the training provisions of the bill.

Mr. CORNELL. I do note that Mr. Soler in his statement talked about a free choice. Of course, this is one of the arguments that is presented by the commercial or profitmaking——

Mr. SOLER. I am referring to a different type of free choice. I think that is where a local department of social services may insist that a parent put a child in day care and then seek employment. I think this is an option and a right that a person has to determine for himself. I was not referring to free choice of profit.

Mr. CORNELL. You would not extend your free choice to the extent that parents could choose to place their children——

Mr. SOLER. I think if there are private day care services that are not privately funded that certainly should be an option. I believe we have had rather some extensive experience with nursing homes that are privately funded. I do believe that human services, the quality of service and the tax dollar has to be applied to that as opposed to a profit margin in talking about their children and their needs as a market as opposed to a human need.

Mr. CORNELL. I don't know whether you were here this morning but, if you were, one of the witnesses from Michigan pointed out the amount of $6 and some cents per child for day care centers which were private. Why I asked it particularly is that we had a panel here earlier during the hearings from New York. I would gather, therefore, that you must have quite a sizable group that came. You must have private profitmaking child care centers in New York.

Ms. LUBIN. May I answer that. In New York City where we have very high standards and a very high code of licensing, no private profitmaking agency has been able to get their license.

What the earlier panel was referring to was upstate where it is true that there has been very little publicly funded day care. There has just been no alternative up there. The public agencies up there will under title 20, and will even more under the new bill if it is passed, make the effort to make it possible to have publicly funded day care centers. At the moment these are very scarce in the rural areas.

Mr. CORNELL. As I recall, the members of that panel though stressed the requirements for licensing and the standards that they were required to conform to.

Ms. LUBIN. The State licensing standards are better than the Federal, but they are not as good as in New York City. It is, therefore, possible to get a license upstate. Also the costs are less, whereas in New York City to meet the standards the costs go beyond what anybody could make a profit from.

Ms. FOX. There has been some private proprietary child care, full day care in New York City. They have gone out of business. A franchiser came into a couple of neighborhoods I am familiar with and has since closed up. So, it is possible, but they serve a very, very narrow market.

I should stress that Banker's Trust is expressing no opinion as to which would be preferable, private or nonprofit. Our main concern is choice and access for our employees.

Mr. CORNELL. There is one other point that I noted here in Mr. Soler's testimony, and that is he referred to the fact that we have approximately 600 children, ages 3 through 11 years, and 500 parents participating in the early childhood program. What do you mean by "parents participating"?

Mr. SOLER. Parents participate first in the policymaking body for each of the centers, and this involves, after the position of director, the hire of all the people, interviewing and screening people. They also plan activities and deal with special problems that may come up in classrooms. Many of the extracurricular activities are parent operated and parent funded. They also do have a policymaking roll in the operation, and they help to select staff for each of the centers.

Mr. CORNELL. Are these volunteer services that they provide? Are they reimbursed for these services?

Mr. SOLER. No, the persons are not reimbursed. They have their own fund. I think under the budget from ACD there is a budget from parents. They raise a good deal of their money, fashion shows, dances, bus trips. There is a great deal of community activity and friendship that develops in the community around these activities.

Mr. CORNELL. In other words, you don't have to entice them?

Mr. SOLER. No, we don't have to entice them particularly when it comes to the hiring of staff.

Mr. CORNELL. You probably noted that I mentioned earlier that my efforts over the years in getting more parental participation in school activity on the whole were not too successful. You get a small core, of course, that will always come.

Mr. SOLER. One of the factors I want to bring out is that the various cores of activity in the settlement become a cohesive element. Parents belong to our credit union, food buying club, they can finish their high school education, they can have their teenagers in the college readiness program.

There is a lot of activity that takes place at the settlement. The core of this is the day care program. In fact we have one of our staff workers who was one of our children in 1941 who now is a staff worker at the settlement.

Mr. CORNELL. When you are talking about the 500 parents participating you mean they are participating in your child care program?

Mr. SOLER. Yes. In fact I took a lower number because I wanted to take a number that I would be able to document and substantiate. The number should be actually closer to 700 parents. In fact there are more parents. The services are also available to other parents who join in activities.

Mr. CORNELL. I note you also have some additional support services. Do you have such services as family counseling?

Mr. SOLER. We have through the psychologists. We have a psychologist that is employed with private funds that we raise at the settlement. We also have a medical consultant, Dr. Charles Goodrich from Mount Sinai Hospital available on call for medical consultations in emergencies.

Mr. CORNELL. One other observation. I got the message and it is very clear that you do not favor having the day care services of New York City coming under the jurisdiction of the school board.

Mr. SOLER. I understand in other parts of the country the policy must be flexible and it is appropriate in other parts of the country. I feel so concerned about this, it is so serious, that I think it would be a disaster in New York City to put day care on the board of education. It may be appropriate in other parts of the State or in other parts of the country but in New York City there is currently great scandal involved.

The UFT is heavily engaged in elections. There is published evidence that the school system in New York City is second rate. Day care is first rate. I would hate to pollute, dilute and make the program ineffective by bringing it under the board of education.

Mr. CORNELL. Then you would favor State and local government as such as being prime sponsors?

Mr. SOLER. Yes. I believe that the system that we have now in New York City seems to be working. They have effective day care programs. Someone said we have a mechanism that is set up already. I think Mrs. Lubin may want to comment on that.

Ms. LUBIN. I would certainly agree that we feel the prime sponsor should be the local government agency. It may be the human resources department, it may be the social services department, it may be, as we have in New York, a special agency for child development. We feel very strongly that we have an ongoing mechanism and it is better than any that could possibly be done through the board of education.

I would also like to add in terms of parent participation that one of the great shortcomings in New York and which can be attested to I think by everybody on our panel is that when a child leaves day care and goes into the public schools the parent completely loses, and we have been trying very hard to see whether it could be built into the public schools and we have been unsuccessful because while there are PTA's there is no real participation. The parent often cannot even consult with the teachers.

Mr. CORNELL. Of course that has been my particular experience on the secondary and college level. No matter what efforts we made there was very, very little parental participation except, as I said, you always find a small number who are very active. But to get any sizable number participating I find very difficult. That is why I can see in your account of the set up you have it is practically a way of life for them that is involved here.

There were several questions on your general statement that you submitted that the staff has drafted. Do you have any recommendations for the kind of monitoring machinery which should be established under this bill to assure adequate standards of care?

Ms. LUBIN. I am trying to get somebody else to take it but we do have quite specific recommendations along those lines. We have been operating a large number of HEW and other Government programs, including those under the LEAA and under the Department of Labor. The departments have developed good criteria for monitoring, they supervise the monitoring that we as the sponsoring agency do directly but they lay down the criteria.

We follow them and we follow them very carefully. For example, I am the evaluator of one of the programs, youth services, that is one of the track services of HEW and deals with kids 13 to 21. The procedures we have been using in monitoring and monitoring a homemaker service under title IV could very well be applied, the same kind of procedures could be applied to the monitoring of day care.

Mr. SOLER. We have had experience with the monitoring of title IV where there are workers that come into the field, monitor the program and it keeps us on our toes. It can be done. I think it has to be, of course, properly funded.

I might also add that I think the whole question of evaluation, that is the funding of a combination perhaps of a major educational institution with a private, not for profit community group to do evaluation is an important way to learn also about what is going on in the program and to keep that program in a state of evolution so that it can be responsive and find ways to improve its services.

I want to praise the committee for being aware of the value of evaluation, training, and research in the area of early childhood services.

Mr. Cornell. You urged in your written testimony the elimination of percentage allocations for membership on the family and child services councils of each of the prime sponsors. Now if that was done how could we be assured that parents would be adequately represented?

Ms. Wittenstein. We really feel very strongly that parents should more than adequately participate in the council. We are really against the rigidity that fixed percentages create. We feel strongly that it should be open, that not only parents, for example, who are being served as of the moment should be on these councils but parents who have been several years out of day care services also have a very valuable contribution to make by being chosen to be on the councils.

Mr. Cornell. I see one problem there though, of course it depends on the locality I would presume, and that is the number of parents that you could get involved and to see that there is good representation. You don't seem to have any problem?

Ms. Wittenstein. No. As you have heard Mr. Soler say, the settlement houses are very especially organized and I am not saying that it is an easy task to get parents involved but the mechanisms that are around settlement houses make it more simple for them because if you don't get parent participation in day care you can get it in other kinds of programs.

Settlements have a number of resources, not only through their programs that they operate themselves but referral services throughout the city, and people capable of seeing that parents and other members of programs are able to get them.

Mr. Cornell. One last question.

You suggest a clear criteria for the determination of what is a reasonable fee schedule should be specified in the legislation rather than be left up to the Secretary. Do you have any recommendations as to what the criteria should be?

Ms. Lubin. Having dealt with title IV and the fee scale program for the last 3 years in which we were very unhappy over the different kinds of fee scales that were fixed we felt that you could not really trust at the moment HEW to fix those directly and therefore we would like to see the legislation specify, for example, that net income should be used and that work related expenses, pension payments, we can be very specific on it, but all of the other elements that are an expense to the family and in particular things like special medicare of other children should be specified as being deductible in the calculation of net income so that it would not be possible, as was the case in all of the proposed fee scales, that you would have a sudden cutoff if you earned $1 more and you suddenly had to pay a fee that would put you out of day care. It is that kind of criteria that we would like to see in the legislation.

Mr. Cornell. We appreciate the reason for your asking this. It was just a question of the recommendations as to what criteria should be used.

Ms. LUBIN. I think we have somewhat spelled that out. There was a good deal of earlier discussion. We developed in New York City with the agency for child development what we considered were fair criteria for setting fees and the agency agreed with it.

We had difficulties in the past with our State because the State thought that these were too generous, but we think this is the kind of criteria, the specific outline of what should be deductible, and then the way in which the scale should be determined rather than just leaving it either to the State to do it at random or leaving it to HEW to decide what the fee should be and regulations.

Mr. CORNELL. Thank you very, very much. You have been very good spokesmen and spokeswomen for your case.

[The joint prepared statement of the panel follows:]

United Neighborhood Houses of N. Y., Inc.
101 EAST 15th STREET • NEW YORK, N. Y. 10003
Phone: 677-0300

STATEMENT PRESENTED ON BEHALF OF THE UNITED NEIGHBORHOOD HOUSES OF NEW YORK CITY AND THE OTHER PARTICIPANTS IN THE PANEL ORGANIZED BY UNH, BEFORE THE JOINT HEARING OF THE HOUSE SELECT SUBCOMMITTEE OF EDUCATION, THE SENATE SUBCOMMITTEE ON CHILDREN AND YOUTH, AND THE SUBCOMMITTEE ON EMPLOYMENT, POVERTY AND MIGRATORY LABOR

ON THE CHILD AND FAMILY SERVICES BILL (H.R. 2966, S.626)
JUNE 20, 1975

As we indicate in our oral testimony, the panel organized by United Neighborhood Houses urges the immediate enactment of a law based upon H.R. 2966 and S. 626. We support the funding concepts, and welcome the new approaches to the provision of essential services to families and children that are included in the current bills. We wish to point out in our written testimony some technical problems which we believe can be solved in the final version of the bills. We also are responding to a number of points that have been raised by various speakers during the earlier hearings.

1) Funding Mechanisms

We strongly support the concept of prime sponsorship as a mechanism for funding, to be undertaken by states, by local governments, groups of local or county governments, and, as approprite, by private non-profit organizations. Our current experience with the Comprehensive Employment and Training Act (CETA) substantiates our belief in the concept of prime sponsorship.

We urge that the flexible system set forth in the present bill be retained and oppose any requirement that all funds must be channeled through any particular agency or department. We do not believe that the public school system should be singled out as the "presumed" prime sponsor of the programs covered by the bills. While we agree that in some cases individual school boards (whether public or non-profit private schools) may be appropriate project applicants, we feel strongly that the prime sponsorship should remain, wherever possible, the responsibility of the Human Resources or Social Service Departments of State or local governments, rather than the Departments of Education or the Local School Systems.

This point of view is the consequence of our long experience in dealing with both systems and with the rigidity encountered in obtaining substantive support for family services or parent participation from the school system.

While we clearly welcome the use of school facilities wherever they are available, we believe that allocation of funding authority to school boards or boards of education would have a negative result. We have known the numerous problems facing the parents of children in the public schools, and have seen the inevitable bureaucratic rigidities that have dominated the school systems of New York City, even with school decentralization. Parents who have been helped by the intimate relationships of neighborhood based child care centers are constantly frustrated by the inaccessibility of the rigid atmosphere of the public school system, even at the kindergarten level. This has been particularly the case for families from minority backgrounds or those with special problems.

We do not believe that our present school system can be an effective instrument to undertake prime responsibility in dealing with preschool children and their families. The school system does not provide the same kind of emotional and social development and family participation which is the basis of successful quality day care. We feel therefore that the role of the school system for children under five should be one of cooperation and supplementation rather than that of prime sponsorship or program leadership.

2) Federal Standard Setting and Effective Licensing Procedures

We fully agree with much of the testimony presented by the American Federation of Teachers and others concerning the current shortcomings of many of our existing day care programs throughout the nation, and especially those which are operating under little supervision in homes or in store front areas where there are inadequate educational and social support components. It is for this reason that we so strongly support the development of strong licensing and high standards. But we agree that the mere requirement of licensing or issuance of standards does not necessarily mean that good quality or even safe conditions will be provided in practice. We therefore urge the need for adequate federal standard-setting and funds for enforcement and monitoring at the State and local level, so that we can move toward a nationwide system of developmental care that will really serve both our children and their families.

3) Role of Private Agencies

We also agree with those that have urged that public funds should not be available for profit-making and especially for franchised day care centers. We know well their poor track record. We do not, however, underestimate the role of non-profit privately funded and frequently experimental, programs such as those which have been supported by foundations or corporations in allied fields. We believe that these centers serve a social and educational purpose — provided that they are licensed and meet approved federal standards. Their use should be encouraged -- especially for families who either are ineligible for admission to public facilities under any of the various programs or who find such experimental centers more adaptable to thier own needs. We believe that the administrators and teachers in such centers should also be able to benefit from appropriate training programs of all kinds — whether publicly or privately funded. But such centers, no matter how high their quality, should not be direct recipients of public funds which could then revert to profit-making owners or stock-holders. We therefore urge that wherever the phrase "private" agencies appears in the bill, either the phrase "voluntary" or "non-profit private" agencies should be substituted.

4) Coordination and Administrative Responsibility

We welcome the proposal to establish at the federal level, an Office for Child and Family Services which would replace the current Office of Child Development and which would carry substantially increased responsibility — both with respect to the provision of family services and for coordinating programs in HEW and in other departments.

We believe that the provisions for coordination should be somewhat strengthened so that the director of the Office for Child and Family Services clearly has the major responsibility for coordination of all of the services which are necessary to implement the goals of the Act. We are particularly concerned that this include the responsibilities for day care and related services that are attributed to S.R.S. in connection with the implementation of Title XX of the Social Security Act. We feel that unless express authority is given to the Director of the Office for Child and Family Services the director may be competing with respect to the approval of plans and the enforcement of standards, with the federal authority given to the Secretary or the Division of Social and Rehabilition Services (S.R.S.) under the funding of Title XX of the Social Security Act.

5) Delivery Systems — Role of the States

We also believe that some of the elements of the delivery system in the Mondale-Brademas bill should be reconsidered in the light of the enactment of Title XX. It is important to ensure that the provisions concerning annual comprehensive plans required under Title XX not be in competition with plans approved under the Child and Family Services bill. In the light of the experience of the last year or two, authority for approval of the delivery system of the Comprehensive Child and Family Service Plans of the prime sponsors should be at the State level. It seems to us that referring every plan to the federal level, including approval of individual Project Applications, would create a bureaucratic nightmare and tend to delay or lessen the effectiveness of the implementation of the program as a whole.

If the State plans that are being developed under Title XX in accordance with federal regulations and guidelines prove to be in any way a satisfactory delivery mechanism for social services, this procedure might well be followed in connection with the Child and Family Services bill. We realize that there are difficulties in this concept especially where States are either unwilling or, to say the least, not eager, to undertake this kind of responsibility. However, at the same time, our experience in dealing with federal regulations in connection not only with Title XX but also with the Runaway Act and with the Law Enforcement Assistance Agency, leads us to fear the current federal tendency toward rigidity and inclusion of requirements that may prove to be unreal and unfeasible in execution. It is for this reason that we not only support the flexibility of the prime sponsorship formula, but urge that some of this flexibility be carried over into implementation.

6) Eligibility and Fee Scales

Another administrative area with which we are much concerned is that of eligibility for service and determination of fee scales. We welcomed the liberalization last year that indicated that no fees could be charged for families with incomes below the Bureau of Labor Statistics lower living standard (as adjusted regionally and with respect to size of families), and that a sliding scale be developed, in accordance with a family's ability to pay. In order to obtain maximum coordination, we suggest that the formula utilized in Title XX to determine eligibility for free services (on the basis of 80 percent of the median family income) may in fact prove to be equally liberal. In any case, the concept of a sliding fee scale as it appears in the Mondale bill, appears to us the most desirable way of fixing fees, and we hope that provisions along these lines will be adopted.

We question the desirability of leaving full responsibility for establishing such fee scales to the Secretary of HEW or the Office of Child and Family Services. We believe that clear criteria for the determination of what is a "reasonable fee scale" should be laid down in the legislation itself. The application of such criteria should then be determined either in a State Plan or be incorporated in the Plan of each appropriate prime sponsor. It seems to us that only in this way can the varying regional costs of living be fully taken into account in determing "reasonable" fee scales for services. Indeed, if such criteria were clearly specified in the new legislation, it could also be of help in guiding the setting of fee scales that have now been left entirely to state decision under Title XX.

7) Council Structure

We warmly applaud the full recognition of the value of child and family service councils at the federal, prime sponsor, and project applicant level. We believe that the concept of providing for direct participation of consumers of services and of parents marks a great step forward. We feel that some changes should be made in order to permit the best possible functioning of the Councils at the various levels.

The role of the Child and Family Services Coordinating Council is essential and is clearly defined in the Bill. The only problem we see with respect to this Council is that the absence from the Council of representatives of the Office of Management and Budget may provide a tool for impoundment. In addition, we would suggest that some kind of advisory committee to the Council composed of representatives of consumers and the provider agencies, might serve a useful purpose in bringing to the attention of the Council some of the difficulties that will necessarily arise in the implementation of the Act.

We are more concerned about the structure and duties given to the Child and Family Service Councils of each prime sponsor. In the first place, we do not believe that percentages concerning any category should be included in the legislation, since such percentages may well handicap the flexibility of composition and lead to additional "politics" determing the choice of the remaining members of the Council. We suggest that this section (Section 105 a 1&2) be reworded to provide the Council include representatives of all agencies directly concerned with child care (to include agencies such as Health departments, licensing agencies, professionals in early childhood education, provider agencies, etc.) in addition to representation of parents. Similarly, Paragraph 3 calling for "one-third of the total membership" of the Council to be "persons who are economically disadvantaged" is also too simplistic in concept. We believe the total membership should take into consideration the ethnic as well as economic composition of the families served.

Again, in dealing with the composition of the Child and Family Service Councils the phrase "democratically selected" needs clarification.

In addition, we believe that some of the responsibilities allocated to the Councils are really administrative or staff functions rather than policy making. It seems to us, for example, that it would be impossible for Councils to be responsible for on-going evaluation, but that they could and should review evaluation reports on such programs before they are submitted to the Secretary. Clearly, the criteria for evaluation and monitoring must, as in the Bill, be established by the Secretary and must take into account regional differences.

We most heartily applaud the provision that the Council, either upon its own initiative or upon request of a project applicant or any other party in interest, should conduct public hearings. This is a concept that has been given too little place in most of our legislation.

Moving to the Parent Policy Committees of project applicants, we again would like to raise some questions. We fully agree that half of the members should be parents of children served by the individual project concerned and that the remaining members should consist of persons who are representative of the community and approved by the parent members. We believe that the single member named because of skill in child development should probably serve as a non-voting chairman rather than as a member of the committee. In this way the committee would benefit from professional guidance without the non-parent member being directly involved in decisions reached by the parents.

We believe an additional requirement should be that parents should in all cases be represented on the Board of the project applicant agency. In this way they would have a say in the direct administration which they would not have as an advisory committee.

Finally, we also feel that the responsibilities allocated to the Parent Policy Committee (in Section 107-A) are too broad in content and include responsibilities such as direction and evaluation of project which could not be realistically implemented. For example, approval of the project director by the Parent Policy Committee would be an infringement of the respnsibility of the sponsoring agency and its own board. All of these problems we believe can be easily dealt with as language amendments but we wish to call attention to them at this time so that they are not used as an excuse for ultimate opposition or veto fo the Bill.

8) Training

Another area to which we attach particular importance is that of training. We welcome the specific provisions that are included in the Brademas version of the Bill. We welcome the recognition of the role of the Child Development Associate and of credentialing that can be undertaken in addition to that of teacher training institutions. We consider these provisions a broad step forward and we hope that in addition it will be made clear that training institutions can be funded whether or not they are rated as appropriately credentialed agencies. We believe that funding of broad and comprehensive programs for all of the various areas of service is one of the best ways in which to improve the quality of our child care programs and meet the needs of our families throughout the nation.

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Mr. CORNELL. The next witness I understand is Harry Teter, Executive Director of Appalachian Regional Commission.

STATEMENT OF DONALD W. WHITEHEAD, FEDERAL COCHAIRMAN, THE APPALACHIAN REGIONAL COMMISSION, WASHINGTON, D.C., DELIVERED BY HARRY TETER, JR., EXECUTIVE DIRECTOR, APPALACHIAN REGIONAL COMMISSION, ACCOMPANIED BY JEANNE BERMAN AND ROBERT DECKER, CHILD DEVELOPMENT STAFF, THE APPALACHIAN REGIONAL COMMISSION

Mr. TETER. Thank you for the opportunity to appear in Don Whitehead's place. Mr. Whitehead regrets very much he had to be out of town today. He received notice to accompany Senator Randolph on a trip.

I am Harry Teter. I am accompanied today by Mrs. Jeanne Berman and Mr. Bob Decker, who are on the child development staff at the Appalachian Commission.

There has been a statement submitted by Mr. Whitehead.

Mr. CORNELL. The statement will be inserted in the record at the conclusion of your testimony; you may proceed as you wish.

Mr. TETER. If I may give a brief summary of that statement we will be glad to answer any questions that we can.

The purpose of this testimony of Mr. Whitehead is to share some of the experiences of the Appalachian Regional Commission in the course of development and implementation of its comprehensive child development program as authorized under section 202 of the Appalachian Regional Development Act of 1965 as amended.

In doing so I wish to point out my concern with certain features of the child and family services proposal. The Appalachian Regional Commission recognized the need for a child development program as a vital element in its program of regional economic development. Congress authorized the Commission to undertake a demonstration program that would test alternative models in the context of a national laboratory setting.

The approach selected required flexibility to meet gaps in services as determined locally through improved planning and administration by State, multicounty, and local governments. This was accomplished through formation of interagency councils which overcame narrow service delivery patterns.

In 3 years the program has reached over 120,000 children under age six and nearly 220 out of 397 counties in Appalachia and created over 5,100 new jobs in service projects. Another 5,000 parents have been able to accept employment because of the availability of quality child-care assistance. As a result of the Commission's emphasis on interagency cooperation several States have begun consideration or have passed new legislation to improve the quality and coordination of services to children.

The delivery mechanism now in place in most Appalachian States can provide efficient management of other Federal programs designed to serve children.

I have made the preceding statement because it represents the collective experience of the States as to the need for coordinating and integrating existing and new resources for children and family services. The success of the Appalachian States illustrates that within the context of a Federal, State, local partnership it is possible to build not only coordination of services but more effective and appropriate decisionmaking at all levels.

Most importantly it can be done without creating a large Federal bureaucracy. Although H.R. 2966 refers in its legislative purpose to partnership of parents, community, private agencies, and State and local government the method of implementation proposed fails to recognize the identities and responsibilities of the partners.

In my opinion the proposed bill has three fundamental weaknesses: One, the nature of the prime sponsorship establishes an unacceptable pattern of Federal to local relationships and excludes the State governments which diminishes the role of the elected and publicly accountable officials. This weakens our system of government by enhancing the power of appointive officials who cannot be held accountable by denying the ability of the people to express their collective will.

The proposed measure increases the tendency of government to promise much and deliver little. The net effect causes high expectations and results in frustrations and distrust of government. A continuation of this promise will only exacerbate feelings of distrust of purpose of government.

The proposed bill eliminates the role of the private sector. Approximately two-thirds of all child care in the country is provided through an expensive but informal network of private providers such as nursery schools, day care centers, kindergartens and in many cases neighbors and relatives. This sector has a valid contribution to make and can provide an effective and cost efficient service if carefully monitored and regulated through appropriate licensing arrangements.

In conclusion I share the concern of this joint committee in bringing this important piece of legislation forward for debate and discussion and encourage you to counsel with representatives of the Appalachian States on their experiences.

Thank you, Mr. Congressman. I will be glad to answer any questions.

Mr. CORNELL. Thank you very much.

One question comes right away. You criticize the provision for prime sponsorship in the legislation.

Mr. TETER. Yes.

Mr. CORNELL. What would be your suggestion?

Mr. TETER. We feel that this would be best lodged with the Governor or an office of the Governor but at a State level responsible to the Governor.

Mr. CORNELL. You are in favor, in other words, of either State or local governmental agencies being prime sponsors?

Mr. TETER. No, sir, I would have just the State.

Mr. CORNELL. Just on the State level. Also, one of your criticisms was the fact of too much expectation as far as program is concerned and that in the long-run you can't realize all these. I think primarily of course it is because of the financing that is involved.

Mr. TETER. That would be one. I think also the idea that we are possibly creating another program and there is a plethora of programs now in existence. Possibly what would be better served or how we would be better served would be to have a coordinating unit such as we have tried to establish in all of the Appalachian States for the program to make certain that we are gearing the best use of the programs now in existence to the needs of the locale. It is a more efficient, I think, and a more economical way in which to do business.

Mr. **Cornell**. It is true as you mention, of course, that as far as programs for children there is no real coordination. Of course we have that as one of my personal criticisms of the welfare system on the national scale. We pile one welfare program on top of another, many of them overlapping. Although well intentioned, I have to question that. That is why I am so strong in promoting my negative income tax approach that would eliminate a lot of these programs and yet, of course, still provide for these people who have to be taken care of under some type of welfare program.

One other thing that I thought was rather interesting in view of the testimony that we had today and that is, of course, your defense of the private sector. In other words, you believe that profitmaking child care centers should be permitted to participate in this program.

Mr. **Teter**. I do not think they should be excluded. I think you should have definite regulations and there should be good oversight but I would not exclude them.

Mr. **Cornell**. The States, for example, that you are referring to in Appalachia, are you familiar with the State legislation in regard to licensing and supervision standards for child care centers?

Mr. **Teter**. For any particular State? They differ somewhat in the different States. We do have the collective knowledge I think that we can respond.

Mr. **Cornell**. Do you feel that the standards that are provided by State law in these States are satisfactory at present?

Mr. **Teter**. Two come to mind where I could right away say yes. I could give you a more detailed explanation of that on the 13 States. For the record we will submit it later.

Mr. **Cornell**. I wonder about the need. So often in Federal legislation the legislation involves setting minimum standards in order to get the States to conform at least to those minimum standards. That is why I was wondering about your opinion of the standards of the States in Appalachia.

Mr. **Teter**. None come to mind of the 13. I might ask my cohorts here if they know any of the 13 that they would say would be below what would be an acceptable norm that a national bill should provide.

Ms. **Berman**. In addition to State licensing standards for child care centers, funds that go from the Appalachian Regional Commission through States to projects have to meet Federal interagency day care requirements. In most instances Federal interagency day care requirements, particularly for child-staff ratios, are higher than State standards.

In large part, and I think it is not only true in Appalachia, standards for licensing deal most specifically with the physical facility. In general I would say standards in Appalachia conform with the national average. They might be higher indeed. Particularly in one State, in the State of North Carolina, there are two sets of standards, one for licensing and one for certification, it is called, which is a higher standard than is required for any facility receiving Federal funds. So there are differences.

Mr. CORNELL. How about the enforcement of standards? Why I ask this is that I find there are complaints about it. Do you find that the enforcement of the standards, for instance, for publicly operated day care centers are apt to be more lax than those for private, whether nonprofit or profit?

Ms. BERMAN. I cannot really speak to that. Maybe my colleague can. Under the Appalachian program each State is required to submit a State plan. Under that plan one of the requirements is for each component of the plan there must be standards. Those standards are approved by the Commission, itself, and are always established by the interagency committee.

Frequently they are higher than the existing standards for similar programs already operating in the State. I hope that answers your question.

Mr. TETER. Every year when the project comes back up, if it is a renewal to continue the project it is reviewed again and those standards are looked at to make certain that they are being kept. So, both at the State level they are checked and again at the Commission.

By the time they come back to us there must be a certification that the goals are being met and that any rules and regulations that would guide the quality of it would be monitored sufficiently.

Mr. CORNELL. Is there regular ongoing monitoring or inspection of the day care centers?

Mr. TETER. Yes. And that is at the State level. The State people do that. They periodically spotcheck some, or we even go on a site visit, ourselves, from here, but the States do monitor their own projects.

Mr. CORNELL. Thank you very much.

Mr. TETER. Thank you.

[The prepared statement of Mr. Whitehead as presented by Mr. Teter follows:]

STATEMENT OF DONALD W. WHITEHEAD FEDERAL COCHAIRMAN OF THE APPALACHIAN REGIONAL COMMISSION SUBMITTED TO A JOINT HEARING BY THE HOUSE SUBCOMMITTEE ON SELECT EDUCATION AND THE SENATE SUBCOMMITTEE ON CHILDREN AND YOUTH, JUNE 20, 1975

Mr. Chairman, I thank you for this opportunity to come before this joint House-Senate Hearing on the proposed Child and Family Services Bill in order to share some of the experiences and findings of the Appalachian Regional Commission in administering its Child Development Program and to express my deep concerns with some of the features of this Bill. At the outset, I want to assure you that I share your concern for the need to improve the coordination of all Federal programs designed to serve children and their families. The family should be reinforced as the sigle most important influence in the lives of children. All government programs, that are designed to improve a child's development, should be complementary to the family and not a sbustitute or a threat to the family role.

The Appalachian Regional Commission, very early in the operation of its health program, recognized the need for a comprehensive approach to the developmental needs of children as a vital element in the long term development of the economy of the Region. Accordingly, the Congress amended the Appalachian Regional Development Act of 1965, authorizing the Commission "to make grants for the planning, construction, equipment and operation of multicounty demonstration health, nutrition and child care projects."

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The Congress recognized the suitability of the Appalachian Region as a laboratory to test a variety of ideas and concepts. The Legislative history in amending the Appalachian Development Act reflects this intent and the Commission has encouraged a variety of demonstrations that are in fact testing alternative approaches to meeting the needs of children and their families.

The Commission's approach to child development needs recognized that such an undertaking required the flexibility to meet gaps in services, as defined locally, through improved planning and administration by State, regional (multicounty) and local governments. To make this possible we required the establishment of interagency communication and cooperation to overcome the narrow spheres-of-interest that have been established by traditional categorical programs.

The deficits in Appalachia resulting from lack of prenatal care, nutrition and educational support for families have been costly and enduring. Now, the Commission program has begun to have an impact by making preventive services available for the first time in many areas and by encouraging more effective organization of existing resources. The program has enabled States, substate areas, and communities to effectively assess needs for services and to plan programs which best fill real service gaps; it has been comprehensive in concept, ranging from family planning and prenatal care through pediatric health services, differential diagnosis, protective services, quality day care and special early programs for the handicapped; it has established innovative interagency organizations and technical assistance to deal with problems of providing these services in a coordinated way in rural areas.

In three short years, the operational phase of the program has affected over 120,000 children under 6 in at least 222 counties of Appalachia and over 5,100 jobs have been created in service projects throughout the Region. Another 5,000 parents have been able to work because of the availability of quality child care assistance for their families. The flexibility of the program has led to the development of over twenty kinds of services tailored to local needs, and has attracted over $83 million in Federal, State and local funds which otherwise may never have reached rural areas or may never have been targeted for preventive care.

As a further result of governmental involvement in planning and implementing these services, several of the States have already considered or passed new legislation to improve the quality and coordination of services to children--steps which promise to improve the State's capacity to deliver services years beyond local project investments alone. The delivery mechanism developing now in many parts of Appalachia can additionally be expected to contribute to the sensible further development of coordinated mechanisms among programs serving the same target populations.

Mr. Chairman, I have taken the last few moments to describe the Appalachian Regional Commission program for basic reasons. First, it represents the collective experience of the States as to the need for coordinating and integrating existing and new resources for children's services. Secondly, its initial success illustrates that, without a large Federal bureaucracy and within the context of a Federal/State/Local partnership, it is possible to build not only coordination at the service level but more effective and appropriate decision-making at all levels. I might add, that the Commission experience demonstrates that the latter is necessary not only in human service development but in the entire range of economic development programs in which the Commission is engaged.

It is out of the Appalachian Commission experience in working with States at all levels of government that I believe that the proposed bill would counteract the wisdom of encouraging an appropriate role for the States' management of public resources which this Congress, as well as previous Congresses have elsewhere expressed.

Most Federal funds available to serve children are authorized by Congress for specific categories of need, such as Head Start, Maternal and Infant Care, the School Lunch Program and so forth. Examination of the flow of Federal categorical service program funds shows that those monies reach recipients through state agencies organized by specific function--health, social services, education and so forth and operating under specific State or Federal mandates. Usually these state level agencies are required to prepare plans, updated each year, for the use of program monies.

With the exception of recent developments in a few States, there are generally no overall comprehensive planning requirements for children's services designed to reduce or eliminate the fragmentation and overlap in service delivery which is virtually inevitable with traditional funding patterns. Furthermore, lack of an overall planning mandate results in an inability to systematically assess what gaps in service exist until citizens respond in anger and frustration that their tax dollars do not provide basic and essential services. The public responds to what is seen as confusion, duplication, and waste.

The bill before this Committee does nothing to remedy this problem. It creates a new Federal entity to provide a full range of services most of which duplicate services already available, and bypasses the specialized agencies which are currently to provide these services.

Our experience in Appalachia suggests that coordinated planning is essential to avoid overlaps. Only then can project funds be expended as complements to a complete service plan providing for the best use of all public resources.

There is a pressing need to bring state agencies, with their current resources and the multitude of Federal categorical program plans, together to assure appropriate distribution of services. The Appalachian Regional Commission has shown that a state level committee, established by the Governor, and composed of representatives of public agencies receiving funds to serve children can examine the array of needs and match them effectively with available resources to create a network of services reaching children and families. In the Appalchian States, such committees developed initial plans and policies for the organization and delivery of a full range of services with due consideration to the existing resources.

Maintaining this developmental process at the State level is a necessary condition for enabling local service delivery, in the words of one State's Plan, "to meet the complex needs of children rather than the capabilities of exigencies of an individual State agency."

Integral with planning at the state level has been the organization of local interagency and consumer planning groups, often coordinated through existing multicounty planning and development districts. At the local level, all potential resources for service delivery both public and private, are brought together.

The important consideration here is that states are not constrained to operate through the same agency or service organization in each local community. Second, the existence of field data, flexible priorities and technical assistance provided through state level planning and policy give the newly formed committees immediate tasks into which their energies can be devoted; thus the initial enthusiam is not allowed to atrophy in early organizational meetings that often appear unproductive to many local participants.

The development of plans by local communities include:

a. the defined components of a comprehensive program

b. detailed data about their own community and other available resources

c. information and examples of practical alternative programs for providing each of the component services.

Obviously, there is a great deal of flexibility in the local program plans since resources vary from community to community. The emphasis in each community is on strengthening its current resources to serve as a base for expanding scope and services. These local plans are then sent to the State's Interagency Committee. Flexibility in meeting local need is assured, coordination with other local priorities is assured.

Integrating the State and local components results in a plan that establishes State priorities, yet reflects local wishes, permits local autonomy, and points up both the priorities and methods of delivering services at the local level.

The principal concerns in the Appalachian program are:

1. that the authorized child care services will be made available to children;
2. that through comprehensive planning services will be coordinated in such a way as to do away with fragmentation, duplication, and gaps in service; and,
3. that maximum use will be made of all existing financial and human resources to assure appropriate expenditure of new program funds.

A major problem in the bill under consideration by this Committee is that it would add an elaborate new duplicative delivery mechanism which would be counter-productive to efforts to assure that the appropriate services will reach the target population in the most cost efficient manner.

To establish a new system of program sponsorship which short-circuits developing Federal/State/Local partnerships is not only wasteful in terms of expenditure of scarce resources, but will act to undercut the State at a time when they are making progress toward achieving an orderly, effective and comprehensive approach to planning and resources utilization.

I feel most deeply, from the Appalachian experience, that in the delivery of human services programs Governors should designate coordinative bodies and approve those at the substate levels to carry out the planning. This would permit the most effective method of coordinated service delivery for each state, including contracting with private providers. The initial task of a state planning group would be to determine the structure of local and substate planning and service delivery agencies and how their local groups relate to the state level activity. Provisions for participation of parents as well as local elected officials and public and private agencies must be a prime consideration in this initial task.

Placing greater responsibility on the Governors for social service program coordination would keep the number of providers with which the Federal government must deal directly to a manageable level and will readily assume accountability for program quality and effectiveness in relation to utilization of funds. In addition to simplifying the problem of program monitoring, a mechanism for identifying technical assistance needs across any state will be centralized.

The proposed bill mandates the establishment of a Child and Family Services Coordination Council at the Federal level to assure coordination among the Federal agencies serving children.

I submit to you that it is ineffective to attempt to insure interagency coordination at the Federal and local levels without organization or structure at the state level.

Although H.R. 2966 refers in its legislative purpose to partnership of parents, community, private agencies and State and local government, the method of implementation proposed fails to recognize the identities and responsibilities of the partners. Indeed, the proposed legislation deliberately bypasses a major link in the partnership.

Mr. Chairman, the Child and Family Services Bill, as proposed has three major weaknesses:

1. The nature of prime sponship establishes an unacceptable pattern of Federal-to-local relationships which would not be integrated with other patterns of public investment and it superimposes the authority of the Secretary over that of locally elected and accountable officials. This weakens our system of government by enhancing the power of appointive officials and the bureaucracy and diminishing the authority of elected officials responsible to the people. When State and local officials have a declining role in the shaping of major national programs, the people are less able to express their will both by affirmation and by bringing correction to national policy.
2. The second weakness grows out of the tendency to expand the role of the Federal government in areas that exceed its authority, as well as available resources. The net result, all too frequently, leads to heightened expectations and resulting frustration when the expectations are not realized. Elliott Richardson, when Secretary of HEW in 1972, described the problem in a pamphlet entitled "Responsibility and Responsiveness" and I quote him directly, "A consequence (of heightened expectations) is the erosion of confidence in government itself, especially as a means of bringing about desirable change. Americans have never been particularly trusting of government, but still, something is much amiss when surveys show a continuing decline in the percentage of adults expressing a degree of trust in their government."

3. The third weakness, is intimately related to the first two and in the final analysis goes to the heart of what this country is all about, namely the role of the private sector. The proposed Child and Family Services Bill fails to recognize that the majority of child care arrangements in this country are provided by an extensive network of private providers such as nursery schools, day care centers, kindergartens and in many cases neighbors and relatives.

I recognize that informal arrangements that are made with neighbors and relatives are not always comparable with the standard of care proposed by this Bill. Likewise abuses by private profit-oriented providers have occured, when state and local inspection and monitoring fails to enforce adequate standards.

Nevertheless, the private sector should be incorporated in all national efforts to expand the delivery of services to children in order to make available to families the widest choice possible. The appropriate Federal role is to assure that all providers receiving Federal funds are meeting an adequate standard of care.

Competition is an essential ingredient to efficiency. Government should not be in the position of preventing competition by establishing a monopoly or isolating one sector from another or limiting choice to the public or private non-profit sector.

The Appalachian Regional Commission was formed initially out of a national awareness that a major portion of our people were unable to participate in the general economic well-being of the whole society. Not only did widespread poverty exist, but the residents of Appalachia did not have access to basic public services that most Americans took for granted. This lack of access was caused not only by inadequate income, but because facilities and services did not exist and the local economy could not provide for them.

At the time of enactment of the Appalachian Regional Development Act out-migration had reached crisis proportions. Urban centers were filling with Appalachians with little or no education, poor health and few skills. They constituted a great reserve of cheap labor when scarce jobs could be found and a burden on the social service resources, when jobs did not exist.

The Commission recently concluded a year in review and assessment of its undertakings. Among other findings we found that for the first time since the 1940's the average population growth was equal to that of the rest of the nation thereby reversing a two decade population loss. We also found that states have taken enormous strides in improving the quality of leadership and modernizing their institutions to enable them to better serve this population.

Mr. Chairman, I share the concern of this Committee in attempting to address an important need in our society. However, I believe this Bill has significant potential for further fragmentation in the delivery of services as well as the weakening of state and local government.

I would encourage your Committee to look closely at what the Commission has accomplished in the field of human services. I especially urge you to contact the Governor's of the Appalachian States who can provide excellent counsel as you continue your efforts to meet these special needs.

Mr. CORNELL. I believe we have one last witness, very patiently waiting, Mary Ellen Goodman of the Citizens' Committee for Children.

STATEMENT OF MARY ELLEN GOODMAN, CITIZENS' COMMITTEE FOR CHILDREN, NEW YORK

Ms. GOODMAN. I am Mary Ellen Goodman of Citizens' Committee for Children of New York, Inc. CCC is a private voluntary organization made up of professional and lay members concerned with improving services for children in New York City. CCC, which accepts no public funding and is completely supported by individual contributions and foundation grants, has a 31-year history of recognition of the need to serve the child within the context of the needs of the family as a whole. Thus we are pleased to respond to your request for our reaction to H.R. 2966 and S. 626 by applauding the fact that they call for provision of "services to children and their families."

The language of the bills which says that—

> It is essential that the planning and operation of programs be undertaken as a partnership of parents, community, private agencies and State and local government with appropriate supportive assistance from the Federal Government.

meets our criteria for effective day care. We are also pleased with the call for a variety of quality child and family services with:

> Priority to those pre-school children in families with the greatest needs, in a manner designed to strengthen family life and to insure decisionmaking at the community level, with direct participation of the parents of the children served and other individuals and organizations in the community interested in child and family service—making the best possible use of public and private resources—through a partnership of parents, State and local government and the Federal Government.

We feel this proposed legislation represents a giant step in the right direction by focusing national policy on preserving and enhancing family life.

More specifically, we would like to comment first on section 104 of the Child and Family Service bill which calls for prime sponsorship to be vested in States or localities except where they do not apply or fail to qualify. Private or public non-profit agencies may be funded directly only under specified circumstances. They might also qualify as project applicants. The wording of subsection (f) suggests that they could serve as prime sponsors only if the prime sponsor practices discrimination against minority groups or economically disadvantaged children.

We believe that there are three important factors to be considered in designating the prime sponsor:

First, the sponsor should be able to promote healthy competition among groups representing diverse approaches to day care;

Second, the sponsor must insure that no one profession or discipline will skew the focus of the day care service; and

Third, the sponsor should insure that the role of the Child and Family Service Councils in the development of day care services will be a strong one. These councils should not be bound by the perception and expertise of any particular service sector.

In selecting or establishing an agency or agencies to administer and coordinate child and family service programs, we suggest that the prime sponsor should give first consideration to agencies which are not themselves service providers. While such service providers as boards of education, voluntary and private agencies may all be project applicants, the administering agency should not favor a single service strategy but should be able to view and select among diverse types of care with a high degree of objectivity.

One administrative roadblock to the development of sufficient day care services, even when funds have been available, has been the dispersion of licensing authority among several departments. We strongly recommend that the bill include provision for outstationing to the designated administrative agency personnel from those departments with the expertise to determine eligibility for licensing.

Lastly, we feel that the strength of the programs will ultimately depend upon the active participation of Child and Family Service Council members. I know that this is something that you agree with very much.

We would also like to question the conditions set forth in the present bill which place on the council persons who are involved in operating programs. We fear that this might prejudice their view of standards and policies for which the council is responsible. We suggest that this committee substitute provisions which state that no one directly concerned with operating programs should sit on the Child and Family Services Council thus avoiding any conflict of interest. Input from those groups can easily be gotten without their actually having the power to make decisions.

We would now like to discuss the provisions of the bill in the context of the eight principles approved on May 22, 1975 by the CCC board of directors.

1. A service which helps to meet the economic and child rearing needs of the family. The bill clearly recognizes the need for such a service in specifying that priority is to be given to economically disadvantaged children and to children of working mothers and single parents. The bill further says that funds may be used for "other health, social, recreational, and educational programs designed to meet the special needs of children and families," "social services to families including counseling and referral", "food and nutritional services", "diagnosis, identification, and treatment of visual, speech, medical, dental, nutritional, and other physical, mental, psychological, and emotional barriers to full participation in child services programs." These and other similar provisions certainly seem to meet the CCC definition of "child rearing needs of the family".

2. A service which involves parents in all phases of its operation to the maximum degree feasible. Section 102 subsection (c) calls for the establishment and maintenance of a parent policy committee to be composed of parents of children served by the program, such parent policy committee to participate in the development and operation of the program; regular and frequent dissemination of information to assure that parents of children served by the program are fully informed of program activities, and regular consultation with the parents of each child regarding the child or children's development, with ample opportunity for such parents to observe and participate in their child's activities. These provisions, which underscore the vital role that parents play in child rearing, are fully consistent with CCC criteria.

3. A service which provides a learning experience in which the child is helped to develop fully. While learning experiences in general are not described in the bill, there are several references to educational components in day care, after-school and summer programs and programs designed to extend child care gains (particularly parent participation) into kindergarten and primary grades. Citizens' Committee would like to suggest that the definition of "learning experiences" be expanded to include "development of language, self-image, physical well-being and social relationships during these formative years."

4. A service which includes ancillary supports. In describing this criterion, Citizens' Committee has said "it is desirable that the day care providers assist the family to understand and reinforce the programs' activities and objectives. It is also desirable that the providers be sensitive to the family's needs and where possible offer supportive services or make appropriate referrals to other community agencies. Providers should seek to understand the interrelationship between the healthy growth of the child and his family's well-being." While the bill includes provision for ancillary services including medical, social, nutritional, recreational and educational services and includes family involvement, it lacks language calling for continuing interrelationships among the day care providers, the family and the community resources. It seems to us that it would strengthen the provision of these services to the family as a whole if the wording of the bill specified such interaction since the day care provider must understand the individual family's needs in order to serve as a referral source to the most appropriate ancillary services.

5. A service which assures the child a safe, healthful, and pleasant environment. Section 202, subsection (a) describes standards for licensing child and family services facilities as standards which should "deal principally with these matters essential to the health, safety, and physical comfort of the children." We would suggest that the phrase "and to a pleasant environment for the children" be added to this section.

6. A service accessible to all. Section 106, subsection (b) specifies that the child and family service plan shall set forth a program to provide services "only for children whose parents request them" and then says that minority groups, the economically disadvantaged, and children who have not attained 6 years of age shall receive priority as shall children of working mothers and single parents. Subsection (6) then "provides that, to the extent feasible, each program within the prime sponsorship area shall include children from a range of socioeconomic backgrounds." This correlates closely with the CCC description of a quality day care service which says "if priorities must be established greatest consideration should be given to those with the most pressing social and economic needs."

Like many of the previous people who have testified we would certainly hope someday we could have universal day care but we recognize that is not yet here.

7. A service with flexible hours and a variety of components. As the bill is presently worded it does call for both part and full day care, in homes or centers, and with a variety of components. What is lacking, and is included in our explanation of this item is, "resources should be available for infants, after school, and dropin and night care, and appropriate in-home arrangements that meet family needs." It seems

essential that comprehensive family and child care service include this wider variety of components in order to meet the full range of family needs and to encourage development of day care arrangements which may be more cost-effective than group day care in some situations.

8. A service that meets quality standards. CCC calls for offering "ongoing opportunities for staff training and development at all levels." The proposed act is specific and sensitive concerning this area. Sections 401 to 404 deal with the training of personnel for child and family services. Recognizing that one of the major barriers to quality child care is the lack of sufficiently trained staff, the bill singles out this entire area for training at all levels—postgraduate for certified teachers; retraining of existing personnel, preservice and in-service training "for teaching, management, supervisory and administrative posts in childhood programs; help for parents and high school students to understand and practice sound child care techniques", et cetera. Underscoring this concern for the training of personnel is the authorization of a separate appropriation for training.

In summary, if the provisions for prime sponsorship and administrative authority are amended to favor selections of agencies which do not provide service, and if an honorarium is made available to Child and Family Service Council members, Citizens' Committee for Children of New York believes that the bill would meet our criteria for Child and Family Service programs. We would also like to urge the joint committee to consider three other additions to these bills:

1. Expansion of the description of a total learning experience to include development of language, self-image, physical well-being and social relationships.

2. Some stress on the need for day care providers/family/community resource interaction in order to provide better referral services.

3. Extension of the variety of components to be offered to include such items as infant care, dropin care, night care, and in-home care.

We would also like to urge the committee to ask the Department of Health, Education, and Welfare which must issue the implementing regulations, what it plans to propose. The Department's response might disclose weaknesses which this committee would have time to clarify before voting on the bill. The committee might also investigate Department plans for disclosing set-aside funds such as those for the handicapped to ascertain whether HEW plans coincide with the intent of Congress while there is still time to write more specific provisions into the bill.

Thank you for the opportunity to express CCC's opinion on this proposed legislation.

We herewith append a full statement of the CCC principles of quality day care services:

1. A service which helps to meet the economic and child-rearing needs of the family. Some of the economic needs are met if day care enables a parent to go to work secure in the knowledge that his or her child is in a safe developmental environment.

Child-rearing is supplemented if more child providers help to strengthen the family unit with this service. This applies to all families, not merely those with special needs and problems.

2. A service which involves parents in all phases of its operation to the maximum degree feasible. As in the family unit, parents should be encouraged to participate in the day care program. Such participation can be furthered only if there is ongoing cooperation between staff and parents.

3. A service which provides a learning experience in which the child is helped to develop fully. Its impact upon the future lives of the children will be most significant if it can assist in the development of languages, self-image, physical well-being and social relationships during these formative years.

4. A service which includes ancillary supports. In focusing on the needs of the child, it is desirable that the day care providers assist the family to understand and reinforce the program's activities and objectives. It is also desirable that the providers be sensitive to the family's needs and where referrals to other community agencies. Providers should seek to understand the interrelationship between the healthy growth of the child and his family's well-being.

5. A service which assures the child a safe, healthful and pleasant environment.

6. A service accessible to all. Service should be available at no cost to families below a predetermined income level. Above that figure a graduated fee schedule should be established based on ability to pay. If priorities must be established greatest consideration should be given to those with the most pressing social and economic needs.

7. A service with flexible hours and a variety of components. Programs should enable a parent or parents to place their children in all-day or part-time care, depending on family needs. In addition, resources should be available for infant, after school, drop-in and night care, and appropriate in-home arrangements that meet family needs.

8. A service that meets quality standards. Such programs should offer ongoing opportunities for staff training and development at all levels.

Thank you for the opportunity to testify.

Mr. CORNELL. Thank you very much, and thank you for the list of suggestions.

I noted one of them was brought up earlier today, and that is the honorarium for members of the council. You do feel that it would be necessary?

Ms. GOODMAN. Necessary and desirable. We are as eager as you obviously are to see that there be active parent participation. It seems only realistic that among the disadvantaged that it is mandated; it is very difficult for them to come and they have other priorities.

Mr. CORNELL. I appreciate that. The problem I find though in this even with a honorarium and paying transportation costs and such, that these are working people obviously and that is why they have their children at day care centers, to try to get them to come to meetings after they have been working all day I think would be somewhat of a real obstacle to get very sizable participation.

Ms. GOODMAN. There is no question, but as you said, there is a hard core that will come, and perhaps the honorarium will bring out some of the lesser hard core. I would hope that is the way it would work.

Mr. CORNELL. I gather from what you have said that you do not feel that any possibility should be excluded, that is, whether the day care center is publicly operated or private nonprofit or profit; is that correct?

Ms. **Goodman.** We are philosophically opposed to the profitmaking ones, but we are concerned that first of all there be public capability and, therefore, that the emphasis not be there, and also if it became less profitable whether they would disappear. We want a permanent service so that we would tend to favor weighing the profitmaking thing, but I would not actually rule it out.

Mr. **Cornell.** I noted also your observation which is very real is particularly that you favor universal day care, but the time has not yet come. I expressed the same thing in the committee hearings about the hot food program. The ideal would be universal, but you can see the obstacles to such when finally we brought it to the floor, putting a limit of 35 cents, and originally 25 cents, and then 35 cents. It was impossible to get that adopted.

You can see that you are being very realistic and the time has not yet come.

One last question, a matter that has rather bothered me not only as a Congressman but as a clergyman also. I have received a substantial amount of mail claiming that the legislation we are considering here in the Senate and House bills constitute a real threat to family life in America. One Member of the U.S. Senate has sent me some information supposedly in support of that contention.

Would you care to comment on that?

Ms. **Goodman.** My own personal view, and the view of the committee, would be quite the reverse, that the child who is left improperly cared for is a much greater threat to family stability than a child who is left in a safe, healthy environment so that the parents are free to pursue whatever needs they either choose or must. I think it is much more of a threat if they are worrying about the child.

Mr. **Cornell.** You agree that it is a proper governmental role to provide funding and standards such for day care centers?

Ms. **Goodman.** Absolutely. I see no reason why it is not a logical progression down from kindergarten. If it is proper to take them at 5, why is it not proper to take them at 2, if that is where the need is. I think the child will benefit from it, certainly over the "latchkey" kind of existence.

Mr. **Cornell.** Thank you very much.

Ms. **Goodman.** Thank you.

Mr. **Cornell.** At this point, I order printed all statements of those who could not attend, and other pertinent material submitted for the record:

[The material referred to follows:]

HON. MARIO BIAGGI
TESTIMONY ON H.R. 2966, CHILD AND FAMILY SERVICES ACT OF 1975
SUBCOMMITTEE ON SELECT EDUCATION

MR. CHAIRMAN: I am pleased that I have been afforded this opportunity to present my views on the Child and Family Services Act of 1975. The Subcommittee on Select Education and the Senate Subcommittee on Children and Youth, in joint sessions, have conducted comprehensive deliberations on this legislation. The Subcommittees have offered a forum for individuals to air their views on both sides of this question. The feasibility, necessity, and advisability of providing child and family services have been discussed, in my opinion, carefully and completely. I would like to commend the Chairmen of the Subcommittees, my colleague in the House, Congressman John Brademas, and Senator Mondale, Chairman of the Senate Subcommittee (and chief sponsors of the bill), for their efforts in this regard, and for their interest in the expeditious consideration and passage of the bill.

Each year sees increasing numbers of women with children who work. Since it is a matter of necessity, rather than choice, that these parents seek an acceptable place to leave their children while they work, it is obvious that the services provided by this bill are urgently needed.

In my district, in the Southeast Bronx area, there is an approximate waiting list of ninety children for each day care center. The

Director of the Soundview Child Care Center, a relatively small center, advises me that he has a waiting list of about 75-80 children. In all of the southeast Bronx, the total comes to around 500 children waiting to take advantage of child care services. Let me point out this is only a very small section of New York City. The total picture is staggering, pointing to the imminent need for expanded services. How can we turn our backs on these children? How can we turn our backs on their families, who because of poor economic circumstances must work? What are they to do with their children? Their alternatives are poor. Must they decide between leaving their children where they won't receive adequate care, or stay home with them, and let them suffer from economic deprivation.

There are opponents of this bill, but I must confess that none of the arguments have convinced me. Some have expressed opposition to the concept of the Child and Family Services Act of 1975 with regard to regulation, the maintenance of quality services, and the threat of inefficiency. The guidelines are very explicit in the bill for monitoring programs, insuring quality care and maximum efficiency. An Office of Child and Family Services would be set up to coordinate programs which currently exist in the Department of Health, Education and Welfare. In addition, the Family Services Council, chaired by the Director of the Office of Child and Family Services, would be charged with the responsibility of providing financial assistance to eligible applicants.

Other sections direct the Secretary to consider the need factors for the program, prior planning in the area, and the ability of the applicant to serve the children in that area, whenever applications are reviewed for grants or loans. The bill also requires regular and periodic monitoring of programs to assure compliance with the child care standards of the Act.

Section 204 serves to insure an efficient and responsive system, void of discrimination, by withholding grants when there has been a failure to comply with any requirements set forth. While legislation alone cannot insure quality and efficiency, this bill does make an effort, and a very responsible one, to review programs so that it is the most workable and practical system it can be.

Other arguments have been raised that children are better off at home with their mothers. Ideally, this is probably the best way for a child to be cared for. It might be better for the mothers, for the children, for the entire family. But, when one understands the realities of economic conditions as they exist, their contentions lose merit. One third of all mothers with children in the United States work, and three-fourths of those do so out of economic necessity. Only a few working parents can provide unsubsidized day care for their children. Low income families don't have that advantage. The best alternative is for facilities and programs to be placed at the disposal of these mothers where their children can benefit from a happy, practical, learning experience. The Child and Family Services Act seeks to do just that.

I have paid primary attention to the child in this text. And, of course, the child is at the core of interest and concern. But the Child and Family Services Act, as its title implies, seeks to deal with other areas such as providing for prenatal and medical care to expectant and post partum mothers, counseling and referral to help the family determine the appropriateness of services, and attempts to touch other areas as well.

This Child and Family Services Act of 1975 is one of the most necessary pieces of legislation we will consider in this session. Because it affects one of our most precious resources, our children, it is imperative that the bill be moved through Committee and onto the floor for a vote as soon as possible. I fully support the bill and intend to vote for it in Committee and when it reaches the floor.

.ICAN FEDERATION OF LABOR AND CONGRESS OF INDUSTRIAL ORGANIZATIONS

EXECUTIVE COUNCIL

GEORGE MEANY
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June 18, 1975

Honorable John Brademas, Chairman
House Select Subcommittee on Education
Education and Labor Committee
Washington, D. C.

Dear Congressman:

Enclosed is a copy of a statement adopted by the AFL-CIO Executive Council, May 6, 1975, entitled "Early Childhood Education and Child Care Program."

The Council statement calls upon the Congress to enact legislation "to meet America's need for a high quality early childhood education and child care program." The Council statement spells out 10 specific elements that the AFL-CIO believes must be contained in such legislation.

As you know, we have closely followed your hearings and are convinced that the overwhelming testimony has supported "achievement as rapidly as possible of the goal of free, high-quality comprehensive early childhood education and child care services for all children who need them."

Current statistics clearly support this position. Some 26 million children of working parents are in need of care. Over five million children in single parent families are alone because that parent is working on a job.

The AFL-CIO is ready to work with you in enacting legislation that will meet this critical need.

We would appreciate your placing a copy of the statement adopted by the AFL-CIO Executive Council in the record of your proceedings.

Sincerely yours,

Andrew J. Biemiller, Director
DEPARTMENT OF LEGISLATION

Enclosure

Statement by the AFL-CIO Executive Council

on

Early Childhood Education and Child Care Program

Washington, D.C.
May 6, 1975

The unmet need for child care is greater today than it has ever been because large and growing numbers of women have to work. They are being forced to leave their children without the care and attention they need. Other mothers, on public assistance, want jobs but cannot find adequate child care.

The statistics clearly show the growing nature of the problem:

--From 1948 to 1973, the percentage of working mothers grew from 18% to 44%.

--26 million children (6 million under 6 years old) have working mothers.

--12 million children live in female-headed households where the median income is $6,195 if the mother works and $3,760 if she does not.

--5 million children live in single parent families where the parent is in the labor force and out of the home.

During this time of massive and still rising unemployment and continuing inflation, the family's real dollar shrinks. As husbands become unemployed, wives seek to replace their income. But to work, they must find decent care for their children.

More mothers are constantly entering the labor force and many more need and want work. But lack of adequate child care poses a major problem to all of them. In addition, millions of disadvantaged children, whose mothers are home, could benefit from child care services. There are 5 million children under 6 years of age in poor and near-poor families, many of whom could benefit greatly from child care services.

Poor, working poor, lower-middle class, and middle-class women all face the same problem. In increasing numbers, they must work. Only a small percentage are able to get good licensed care for their children which meets Federal standards. The rest are forced to face the never-ending nightmare of making arrangements with a changing group of sitters or with relatives, or leaving their children in custodial parking lots, or even worse, alone, in "self-care."

By any measurement, the nation lacks a comprehensive system of quality child care services to meet these needs. Some local efforts in the child care field have been undertaken over the years with some success. Thousands of children have received beneficial, high-quality services from programs developed by labor unions, parent cooperatives, and local community organizations and church groups. Such programs fill an important need in the communities they serve. These programs, like the excellent centers operated by a number of AFL-CIO affiliates, should be encouraged and continued.

But these scattered efforts, however worthwhile, are clearly far from enough. The only real answer is a massive Federal commitment to the provision of early childhood development and day care in communities throughout the country for all children who need these services.

Prime sponsors must be responsible elected officials. The AFL-CIO believes that there is great merit in giving the public school systems this prime sponsorship role.

In most communities, the school system would be the appropriate prime sponsor of the child care and early childhood development program, with the responsibility for planning programs, distributing funds and monitoring programs. Where the school system is unwilling or unable to undertake this responsibility in accordance with Federal standards, some other appropriate public or non-profit community organization should be eligible.

Even where the public school systems are the prime sponsor, all of the services need not actually be offered in public school facilities. For instance, communities may want in-home child care, family and group day care homes for children who are too young or not ready for large school facilities as well as special services for the emotionally and physically handicapped which may be offered outside the educational system. We support the expansion of these diversified services by educational systems or by any alternative sponsor as they administer these programs.

Only public and non-profit groups should be permitted to participate in the program. There is no legitimate role for profit-making entrepreneurs in child care programs. The sorry record of profit-making organizations in the provision of human services, especially in the nursing home, health care and education fields, has led the AFL-CIO to strongly oppose any involvement of profit-makers in human services programs. Profit-makers were excluded from providing day care under Head Start. They should continue to be excluded in any new early childhood and day care programs.

To meet America's need for a high quality early childhood education and child care program, the AFL-CIO calls upon the Congress to enact legislation that includes the following elements:

1. Achievement as rapidly as possible of the goal of free, high-quality comprehensive early childhood education and child care services for all children who need them. Since the program will necessarily require a period of time to get fully underway, gradually increased funds should be provided toward earliest achievement of this goal.

2. Coordination by the prime sponsor of a range of programs, including health, nutrition, counseling and other necessary support services and child care in a variety of settings including family and group day care homes.

3. Use of the public school systems as the presumed prime sponsors, wherever they are prepared to undertake quality programs meeting Federal requirements.

4. Insistence that all services must meet Federal requirements and standards as well as all local school and facility codes and laws.

5. Denying profit-making operators eligibility to receive Federal funds.

6. Declare existing public and private non-profit programs that meet Federal requirements, eligible to receive funds.

7. Provide for effective parent involvement in these programs, since they are programs parents voluntarily choose.

8. Require that all construction, renovation and repair undertaken under the program must conform to the prevailing wage standards of the Davis-Bacon Act.

9. Provide for training, re-training and in-service training of professional and paraprofessional staff.

10. Provide full protection of the job rights and employment conditions of workers in child care programs.

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Mr. Cornell. The hearing will finally be adjourned.

[Whereupon, at 3 p.m., the hearing was recessed, to reconvene on Tuesday, June 24, 1975, at a time to be determined.]

CHILD AND FAMILY SERVICES ACT, 1975

TUESDAY, JULY 15, 1975

U.S. Senate,
Subcommittee on Children and Youth and the
Subcommittee on Employment, Poverty,
and Migratory Labor of the
Committee on Labor and Public Welfare;
and the Subcommittee on Select Education,
of the House Committee on Education and Labor,
Washington, D.C.

The subcommittees met, pursuant to notice, at 9:30 a.m. in room 2261, Rayburn House Office Building, Representative John Brademas and Senator Walter F. Mondale presiding.

Present: Representatives Brademas, Jeffords, Quie, Beard, Lehman, and Cornell; and Senator Mondale.

Staff members present: Jack G. Duncan, counsel; Patricia A. Watts, administrative assistant; Bob Agee, staff assistant; Marty LaVor, minority legislative assistant; Jill Nevill, staff; and Sidney Johnson, professional staff, Senate.

Mr. Brademas. The subcommittee will come to order. Today we are concluding the joint hearings of the House Subcommittee on Select Education and the Senate Subcommittees on Children and Youth, and Employment, Poverty and Migratory Labor, on H.R. 2966 and S. 626, the child and family services bill.

I want to observe at the outset that the child and family services bill reflects the efforts of numerous House and Senate members on both sides of the aisle, and if enacted, this legislation could prove to be of enormous importance to millions of children and their families.

As we conclude this portion of our work on the child and family services bill, I think it is helpful to recall that this measure was not developed overnight.

Indeed, the subcommittees chaired by Senator Mondale and me held extensive hearings on similar legislation as far back as the 91st Congress.

As many of you will remember, these early efforts were successful in the Congress but ended with President Nixon's veto in December 1971.

However, as numerous witnesses who have testified before us during this session have indicated, the need for child care and comprehensive child development legislation has not quietly disappeared.

For example, Marion Wright Edelman, director of the Children's Defense Fund in Cambridge, Mass., provided the subcommittees with evidence of this fact when she noted during our initial hearings in February that:

Forty percent of the young children in America are not fully immunized against childhood diseases;

Only one out of three AFDC children needing eyeglasses gets them;

At least 10 million children receive no health care at all;

Only 11 percent of the children under age 4 and the pregnant women, needing supplemental nutrition services receive them;

One-fourth of the 27 million children of working mothers are below school age.

Therefore, I think it should be clear to all that the need for such legislation has grown dramatically since our initial efforts in 1971.

Thus far, we have completed nine days of hearings on this important legislation, and with the assistance of more than 70 witnesses, the members of both subcommittees have had an opportunity to explore the major issues surrounding the child and family services proposal.

Let me briefly note some of the areas we have examined.

Without doubt, one of the largest issues is the selection of the best delivery system; on this point, we have heard the suggestions of numerous witnesses who have argued for or against the exclusive use of established delivery systems such as schools and a variety of State government agencies.

In addition, we have heard from many who support the creation of an entirely new delivery system as we propose in the bill.

Another major concern mentioned by many of our witnesses is the role of profitmaking day care centers under the child and family services bill.

In its present form, the legislation would allow the participation of private for profit centers. This issue has caused a great deal of controversy, and we have been fortunate to receive excellent testimony on both sides of this question.

Finally, the question of standards for child care programs has received a great deal of attention. On this point, the witnesses have expressed their views on the need for strong enforceable standards as well as their thoughts on the relationship of standards developed under this bill to those supporting the new title XX and the Head Start program.

Members of the subcommittee have therefore sought to explore in some depth and with some care these issues as well as others which I shall not take time to cite.

I think it clear that members of the subcommittee in the House and Senator Mondale intends to move forward and report out a strong child and family services bill of which we can all be proud.

The Chair also wants to say a particular word of welcome to the distinguished Secretary of Health, Education, and Welfare, Mr. Weinberger, today. I think this is probably the last appearance that the Secretary may be making before this subcommittee.

We have had him here on many occasions during his service. It has not been uncommon for us to find ourselves in disagreement on most of the matters that we have discussed as is going to be the case today.

It is, nonetheless, always stimulating to hear him and Mr. Secretary, I want you to know that I, and I am sure the members of our subcommitee, wish you and Mrs. Weinberger the best in whatever you now undertake to do.

Secretary **Weinberger**. Thank you very much. That is very nice of you.

Mr. **Brademas**. I yield to Senator Mondale for any comments that he wishes to make.

Senator **Mondale**. Thank you, Mr. Brademas.

I would like to share with the chairman, my expression of appreciation to Mr. Weinberger for the years of his service to our country and to the broad range of activities and duties required by the Secretary of HEW.

I think it is a most challenging and difficult task.

While we agree that disagreements have been present, I have always found him to be a person of high intelligence, motivated by the interest of his country. It has been a privilege to serve with you during this period and I wish you well.

Secretary **Weinberger**. Thank you. That is very nice. I am tempted to leave now.

Senator **Mondale**. I have a statement which I will ask to be placed in the record. I just want to make one point and that is that today's hearings are a part of a long and seemingly interminable history of legislative activities which began over 5 years ago in 1969 and 1970 when both Senate and House started the hearings on the original bills from which this legislation developed.

It is well known that the bill passed overwhelmingly in the House and Senate but was vetoed by the President. Since then, we have had over 40 days of public hearings and today hopefully, we will wrap up the current cycle of hearings.

While many things have not changed, some things have gotten worse. I think the condition of American children has gotten worse.

The infant mortality rate in our country is inexcusably high, higher than that of 13 other nations.

While we have made some progress in the treatment of handicapped children, each year at least 200,000 children are struck by handicaps which could have been prevented had they and their mothers received early health care.

Since 1968, a mandatory requirement of screening under medicaid in most States has yet to be implemented in programs mandated by the law.

There are only a million spaces available in licensed day care programs but there is a demand of 6 million preschool children whose mothers are working.

From 1970 to 1973 there has been an increase of 600,000 children whose mothers are working. Between 1971 and 1974, the numbers of single parent families has increased by nearly a million, as much an increase as in the preceding 10 years, to a total of 6.6 million families.

Mr. Chairman, I think the need is clear and it is our task to deal with it.

Mr. Brademas. Without a doubt. With no objection, the Senator's statement will be inserted in the record.

[The opening statement of Senator Mondale follows:]

OPENING STATEMENT BY SENATOR WALTER F. MONDALE, CHAIRMAN, SENATE SUBCOMMITTEE ON CHILDREN AND YOUTH

Senator Mondale. This morning's hearing marks the 12th and final day of the joint Senate-House hearings on S. 626 and H.R. 2966, the Child and Family Services Act of 1975.

These companion bills are designed to provide the financial assistance necessary to help States and localities upgrade and expand their services for families and children. They contain the fundamental principles from the child development legislation which passed the Congress in 1971, but was vetoed by former President Nixon.

As we begin this final hearing, I believe it is useful to recall the history of this legislation. It began over 5 years ago, in late 1969 and early 1970, when both Senate and House subcommittees started hearings on the original bills from which the legislation before us has developed. In those 5 years, we have held over 40 days of public hearings. The 1971 version of the bill passed both Houses of Congress by impressive bipartisan margins, but was vetoed by former President Nixon. In 1972, the Senate passed a revised version of that bill by an overhwelming vote of 73 to 12, but the House of Representatives did not act.

The bills before us today reflect our best thinking, after 5 years of legislative effort, about the way to best provide for the wide variety of programs and services that families want and need.

Many things have changed during the 5 years we have been working on this legislation, but the needs for it have remained constant or increased:

The infant mortality rate in our country is still inexcusably high—still higher than that of 13 other nations.

While we have made some progress in the detection and treatment of handicaps—each year an estimated 200,000 children are still struck by handicaps which could have been prevented if they and their mothers had received early health care.

There are only about 1 million spaces available in licensed day care programs for the 6 million preschool children whose mothers are working.

Between 1970 and 1973, there has been an increase of 650,000 in the number of children whose mothers are working.

And between 1971 and 1974, the number of single parent families has increased by more than 1 million—as much an increase as in the preceding 10 years—to a total of 6.6 million families.

Our bills will not meet all these needs. But, if passed and funded, they will substantially increase the resources available to families and children who need this kind of help.

Above all, I want to emphasize that programs authorized by this legislation are totally voluntary and maximize parent control and decisionmaking. They recognize and specifically provide that child care programs must be voluntary, and must build upon and strengthen the role of the family as the primary and fundamental influence on the development of the child.

They assure that parents will have the opportunity to choose among the greatest possible variety of child and family services—including prenatal care, nutrition assistance, part-day programs like Head Start, after school or full day developmental day care for children of working mothers, in-the-home tutoring, early medical screening and treatment to detect and remedy handicapping conditions, and classes for parents and prospective parents.

In closing, I want to reemphasize—as both Congressman Brademas and I have emphasized from the beginning—that nothing in these bills is etched in stone. This is especially true with respect to the so-called administrative or delivery system issues.

Throughout our hearings we have sought the advice of a broad range of witnesses on how to improve these bills to insure the best allocation possible of administrative responsibility among the various levels of government. That is why we held a day of hearings at which we asked representatives of State and local governments to comment not only on the delivery system provisions in the bills we introduced but also to suggest any other approaches to the delivery system question that they believe we should consider. And that is why we have asked that today's witnesses include not only Secretary Weinberger, but also the departmental officials who administer programs such as Head Start, title XX of the Social Security Act, and related education and health programs.

We are pleased, therefore, to welcome Secretary Weinberger and his associates for their testimony on this very important legislation.

Mr. Brademas. Mr. Secretary?

STATEMENT OF CASPAR W. WEINBERGER, SECRETARY, DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Secretary Weinberger. Thank you very much, Mr. Chairman, members of the committees. I appreciate very much the kind comments you made at the outset and, of course, the opportunity to be here today and to present the views of the Department and the administration on the Child and Family Services Act of 1975, set forth in the Senate bill 626 and H.R. 2966.

I would say at the outset that I do not think there is any correlation between the idea that there are some difficult problems ahead and the assumption that this bill will take care of them.

We have reviewed all of the testimony of the public and private agencies and organizations whose representatives have appeared before these two subcommittees over the several months.

Their views have paralleled closely the arguments voiced over the past 5 years in support of or against earlier variations of the child care and child development program this bill would create.

The family is—and rightly should be—the primary influence on the development of children. Any Government program that touches on the child—be it day care, health care, education, or any other social service—should complement the familiar relationship, not threaten damage to it.

Parents—indeed, all citizens—should have some say in the identification of social services needs and in the allocation of public resources to meet those needs on a rational, priority basis.

And, in the process of organizing Government programs, social, health and educational services should be integrated as closely as possible at the point of delivery.

It does little good, for example, to diagnose a physical or emotional or educational problem in a child if there are no appropriate facilities or services capable of coping with the problem.

But we strongly disagree with the idea behind this bill that we must build a wholly new delivery system for child care services which would bypass, even ignore altogether, the existing array of publicly funded services now directly and indirectly benefiting our children.

And we also seriously question the wisdom of the Government diverting so much more of the national treasury to the kinds of services encompassed in this proposal.

It was on these and closely related issues that the administration strongly objected to the two predecessors of this proposal: The child development provisions of the 1971 Economic Opportunity Amendments which, as you know, were vetoed; and the 1972 Comprehensive Headstart, Child Development and Family Services Act which passed in the Senate but died in the House.

Briefly, our objections are based on these four grounds.

First, the unwieldy administrative structure it would create alongside—and despite—the existing network of child and family services;

Second, the highly duplicative array of services it would offer, again despite the availability of such services for the same target populations through existing Federal categorical aid programs;

Third, the enormous strain which this new program would ultimately place on the Federal budget—a strain even more dangerous than in 1971 and 1972 since we are confronting a national deficit amounting to more than $60 billion or nearly $300 for every American man, woman, and child, including, of course, those this proposal ostensibly seeks to serve;

Fourth, we are strongly opposed to the idea, inherent in this proposal, that the Federal Government should provide mass developmental day care for preschool children all over the Nation.

I will take a few moments to outline in some detail our specific concerns about each of these four points before proposing an alternative means by which the Congress and the administration could move now to meet most, if not all, of the same goals sought in the Child and Family Services Act.

First, the unwieldy administrative structure of the services delivery system proposed in this bill.

The Child and Family Services Act would create a new Office of Child and Family Services within the Department of Health, Education and Welfare with a Director to be nominated by the President and subject to Senate confirmation.

The bill would also mandate establishment of a new Child and Family Services Coordinating Council at the Federal level, duplicating the responsibilities of the Department's Committee on Children and the Interagency Panel for Early Childhood Research and Development, among others.

These were created, of course, to obtain as close coordination of the many categorical programs created by the Congress to focus on particular service needs of children and families as possible.

The pending bill will carry this degree of administrative and programmatic duplication from the top down by adding a new Federal-State-local-public-private services delivery system on top of all of the complex health, education, welfare, and social service networks now in place.

It would put the Federal Government in the position of dealing directly with thousands—perhaps tens of thousands—of local governments and voluntary service organizations as prime sponsors of service programs.

The administrative complexity and the enormous costs of such a situation are manifest; the benefits are completely conjectural.

In effect, the bill would give the Federal Government a far too pervasive role in the organization and delivery of social services at the local level.

This bill would, in almost every instance, push State governments to the sidelines, thereby overriding the traditional Federal-State relationship embodied in the "single State agency" concept which, as you know, permits State governments to determine social service priorities and decide for themselves within broad Federal guidelines, how best to allocate available Federal, State, and local services dollars to meet these priorities.

In lieu of the Governor or the legislature or the "single State agency" planning and allocating these resources and supervising their expenditure, this bill would make it the responsibility of the Secretary of HEW:

To determine who, among localities or competing local agencies, should be a "prime sponsor" of a child and family services project;

To determine whether local sponsors are overlapping in their service delivery areas or duplicating one another;

To determine whether, when and to what extent a State should step in to serve as prime sponsor in an area where local governments or voluntary agencies do not take it upon themselves to operate child and family service programs.

It would also be up to the Secretary of HEW to review the annual service plans to each prime sponsor—and, as I pointed out a moment ago, there could be thousands of these—to insure that each is adhering to federal standards for program quality and fiscal accountability.

In short, this proposal as now framed would demand a veritable army of Federal bureaucrats in Washington and in the Department's 10 regional offices to perform the kinds of programmatic planning, coordinating and monitoring activities that belong more appropriately under the aegis of State and local governments, and which indeed are being done by these governments right now.

The task of monitoring these thousands of prime sponsors would be made all the more complex by virtue of the responsibilities of a Child and Family Services Council which would be created for each and every prime sponsor funded under this proposal.

These groups—composed of an even balance between parents of children to be served and representatives of child-caring agencies and professionals—would be empowered to go far beyond an advisory role to take an active part in the day-to-day management of the child and family services program.

They would be, in effect, an added layer of management superimposed on the professional staff hired to operate the programs.

We oppose according advisory and consumer groups powers which are essentially managerial or policymaking in nature.

To create such an added bureaucratic overlay is to add further administrative complexity which is more likely to impede, rather than facilitate, program development and operation.

We fully recognize the value of advisory groups and consumer representation in preparing recommendations for policy action. We have about 280 of them in the department right now.

But what is frequently overlooked in the constant demands for more of this participation is that we have consumer representation now.

We have it in the formation of policy and oversight of Government programs by Federal agencies. We have the Congress and State legislatures whose members are directly responsible to the people who elected them.

Consumers are, after all, simply the people—all the people. They are not a separate group to be separately represented.

In light of this, we oppose creating hundreds of other nonelected, power-wielding groups as would happen were this bill to be enacted.

The President recognizes the legitimate public and Congressional concern that Federal agencies be more responsive to the interests of the consumers—in other words, to the people.

He has asked all agencies to examine their efforts to represent consumers in their decisions and activities and has directed all agencies to work with his special assistant for consumer affairs to devise means toward this end.

This effort is underway.

Our second major area of concern with this proposal is that it would duplicate an enormous complex of authorities and programs already in place without attempting to pull them together legislatively.

As the members of these subcommittees will recall, I submitted to you last December 20, at your request, a summary statement on Department of Health, Education and Welfare activities on behalf of children as a supplement to the record of hearings then being held on this proposal.

That report spelled out in some detail the extraordinary number and scope of federal programs now serving the nearly 50 million children under the age of 13 in this Nation.

Using budgetary and programmatic data available for fiscal year 1974, our report showed:

That more than $13.2 billion of the Department's 1974 budget was devoted to some 200 programs either directly or indirectly impacting on the health, education, or welfare of our children;

That the Department has taken a number of major steps to reassess and restructure our approach to policy formulation and program coordination, seeking to harmonize the often disparate, sometimes conflicting goals of this overwhelming array of categorical programs at the point of service delivery; and

That the Department has concluded—on the basis of long experience with the management of farflung programs—that we must adopt a more target group-oriented perspective in relation to planning, budgeting, and evaluation of our programs, to insure that the Department, the States and the localities involved in administering these programs are indeed meeting the real needs of those people with real problems.

The pending proposal would, in effect, all but ignore what the Federal, State and local governments are doing—or could do—with the billions of service dollars now being expended through those 200 programs under the other authorities created by the Congress.

If enacted, this proposal would mean wholesale replication of services across the entire spectrum of those 200 programs.

In the area of health care alone, this bill would provide services duplicative of those now available under a dozen Federal-State programs, including medicaid—most especially, early periodic screening, diagnosis and treatment; maternal and child health; community mental health centers, developmental disabilities; family planning service; Neighborhood Health Centers; the migrant children and Indian health programs; and crippled children services.

It would similarly duplicate and overlap an array of programs and authorities under various Education statutes especially title I of the Elementary and Secondary Education Act, the Indian Education Act and programs operated by the Department's Bureau of Education for the Handicapped which together reach hundreds of thousands of migrant and Indian children, non-English-speaking children and children with handicaps.

The most blatant duplication would occur across the entire gamut of services now available under the various titles of the Social Security Act and other statutes providing authorities for human services programs.

These include the social services programs now operating under titles IV–A and IV–B of the Social Security Act, the WIN program; headstart and followthrough; and of course, the newly enacted title XX social services amendments.

Nowhere—save in "maintenance of effort" provisions relating to headstart and to State and local services spending levels—does the pending proposal call for direct linkages to any of these programs.

The bill implies that the Federal level "coordinating council" that would be established would be better equipped to dovetail the planning and delivery of child and family services under other categorical programs than is now the case with the many similar committees we have already established which are also in the main required by law.

This assumption, in our judgment, is ill-founded—given the autonomous nature of the service delivery system embodied in this proposal.

I submit that it would be all but impossible for any coordinating council to mesh smoothly 200 other categorical programs operating through the traditional Federal-State-local delivery structure with a wholly separate service delivery system comprised of thousands of individual projects reporting directly to Washington.

This very issue was highlighted by a number of Senators—including the chairman of the Subcommittee on Children and Youth—during the floor debate over a Senate Finance Committee amendment to H.R. 1 under which $800 million in new childcare moneys would have been administered through a new Bureau of Child Care within the proposed Work Administration.

In leading the debate against this approach, Senator Mondale noted that he remained in favor of new child development legislation but strongly opposed the approach to day care funding embodied in the Finance Committee amendment. To quote from the Senator's comments:

> The Bureau of Child Care which is set forth in this measure establishes a new Federal office, which does not exist, and permits it to run day care centers anywhere in the country, in any fashion it wishes, with no involvement of State and local government.
>
> The Bureau can completely disregard State departments of welfare, and probably will * * *. It ignores the present system and sets up an entirely new delivery system * * *.

Senator Mondale proposed that the new moneys be channeled into day care through the existing title IV program structure because, and again quoting from the Senator's remarks:

> By using an existing program, it would not add confusion and further fragmentation to the system of Federal assistance to child care.
>
> By retaining the Federal-State-local partnership arrangement in the IV-A it would not bypass the other levels of government or create a system with total Federal control.

With these and similar arguments voiced by Senators Javits, Buckley, and Brooke, the Senate agreed to Senator Mondale's proposal that these new moneys be channeled to the States through the existing system.

We do not believe that the Senator's arguments on this issue with respect to H.R. 1 are very less valid today. Indeed, we believe they are even more valid in light of the enactment of the new title XX social services amendments, about which I will have more to say in a few moments.

Our third area of major concern with this proposal has to do with its cost and with several aspects of its approach to Federal funding and accountability for how those funds are to be spent.

This bill would authorize $1.85 billion in new services funding over the next 3 years with $350 million of that amount devoted to planning, training, and other start-up costs alone—itself an indication of the gargantuan tasks inevitable in the creation of a wholly new program as far-reaching as that envisioned in this bill.

That sum, incidentally, is more than one-sixth of the total Federal expenditures projected for fiscal year 1976 under the newly enacted title XX social services amendments.

The proposal assumes annual operating costs would reach $1 billion in the second full year of program operation. Given the scope of the health, education, and social services this bill seeks to meld under one roof—and the expectations its enactment would generate—this in all likelihood is a substantial underestimate.

We are already on the road that took New York City to where it is today. Someday, someone is going to have to have sufficient courage to avoid propelling us further down that road.

Today is a good day to start.

The bill proposes Federal matching at the rate of 100 percent in the startup year, 90 percent in the second year, and 80 percent thereafter, a formula which we believe places far too great a burden on the Federal Government for such a program, particularly when the local share can consist of anything from public funds to donated goods and services.

We believe that States and localities would make more effective use of available social service dollars—including Federal support—if their own stake in the funding of these programs were more proportionate to their responsibility for running them.

This is why we proposed that Federal matching under the new title XX social services amendments be reduced in two annual stages from the current 75 percent level to 50 percent bringing the formula more in line with the formulas now used for Federal reimbursement for medicaid and cash assistance programs.

Also with respect to our concern over the fiscal impact of this bill, we believe this proposal to inject yet another $1.85 billion into direct child care services overlooks a considerable amount of history.

As members of these subcommittees will recall, total Federal support devoted specifically to day care and child development programs in fiscal year 1971—at the time the 1971 child development amendments were vetoed—was approximately $653 million.

At that time, about 825,000 children were receiving direct benefits under these funds through title IV and IV-B services, the WIN program, Head Start and related programs.

Since then, the number of children receiving direct day care and developmental services under these same programs has jumped to nearly 1.6 million and Federal dollars helping underwrite those services have nearly doubled.

For fiscal year 1976, we anticipate that day care services supported under title IV of the Social Security Act and its successor, title XX, will reach a spending level of $680 million in Federal, State, and local funding and will benefit up to 980,000 children.

Another 350,000 children will benefit under the $434 million Head Start program; approximately 36,000 will benefit from follow-through at a Federal cost of $42 million; and an additional 200,000 children will receive day care services under the work incentive program at a Federal cost of $97 million.

And under title XX, note that States may—at their option—provide direct child care services, including day care, to children of any age, including the teenage years, just as prime sponsors could, were this proposal to be enacted.

In addition, since 1970, the Congress has twice acted to make it possible for working parents with children under 14 to list all or a portion of child care costs as deductions on their Federal income tax returns.

Under the most recent congressional action—the Tax Reduction Act of 1975—an estimated 1.8 million families with approximately 2.7 million children and with joint incomes of up to $44,600 will benefit from tax reductions amounting to $340 million.

This will be, in effect, adding more than a third of a billion dollars in Federal support for child care to the more than $1.25 billion in Federal, State, and local funds for day care that will be expended under the social services, Head Start, and WIN programs.

With respect to our fourth major objection to this proposal, we do not believe that the American people have reached a consensus that the Federal Government would provide the kind of mass developmental day care for preschool children envisioned in this bill.

We can understand the considerable pressures in favor of this concept that have been brought to bear on the Congress by those who have themselves accepted it.

But pressures are not always to be yielded to and we believe it would be highly inappropriate for the Federal Government actively to support this approach to child rearing.

Just as this proposal overlooks the rapid growth in the sheer numbers of children now being served and dollars being spent through direct child care programs, so does it appear to ignore a very fundamental alteration in the Congress' own view of the proper State role in the traditional Federal-State social services partnership.

I am referring, of course, to the philosophy underlying the enactment of the title XX social services act amendments by the 93d Congress—which signaled a major shift in congressional attitude toward the planning and delivery of social services.

Under title XX, the States will have broad discretion to use large amounts of Federal services funds—up to $2.5 billion—that will help meet needs they themselves identify through programs they themselves structure in ways best suited to local conditions and resources, not needs spelled out in a great detail by the Congress or by Federal bureaucrats in Washington;

But needs identified by State, local, and voluntary services agencies;

Needs felt by the people and voiced directly to program planners through public access to the planning process;

Needs ranked according to State and local priority by Governors and legislatures and budgetmakers who know what resources are available; who are directly responsible for making those resources stretch as far as possible; and who will have to report back to the people on their success—or failure—in mounting and managing the programs demanded by those people.

In short, title XX—which was demanded by the Governors and the social services professionals and the clientele they serve—is a bold new direction in the Federal-State relationship.

And it is one which the administration, the Congress, the States and the voluntary sector have embarked with high hopes that it will lead to a better services delivery program—and hence to better services to the people.

To now enact the child and family services proposal would be, we believe, a giant step in exactly the opposite direction.

A step backward from confidence in the people's ability to identify their own services priorities;

A step backward from confidence in the ability of State and local governments to act responsively and responsibly in meeting those priorities;

A step backward into the age-old, single purpose Federal categorical grant approach that assumes that the bureaucrat most remote from the people knows best what the people really want and really need.

Rather than take that fateful backward step, we propose that the Congress move the Federal-State relationship yet another step forward along the route begun with general revenue sharing and title XX.

We fully support one of the primary goals of the Child and Family Services Act, namely: that whatever services are available to children and their families should be integrated fully at the point of delivery.

We fully agree that this state of the services delivery art can never be fully realized until and unless the Federal Government effects a fundamental change in its approach to encouraging and supporting the delivery of essential human services.

But we do not agree that the means to this end lies in the enactment of the 201st categorical grant program designed to impact on those children and their families.

Rather, we suggest that the Congress act decisively—and soon—to capitalize on the 200 programs already in place by adopting a new Federal perspective on the management of those programs by enacting into law the concepts embodied in the Allied Services Act proposal that we have repeatedly advanced for your consideration over the past several years.

The enactment of these concepts would permit the Federal Government, the States, their localities, and the voluntary sector to achieve the same programmatic coordination envisioned in the Child and Family Services Act—but using existing program authorities and existing Federal, State, and local fiscal resources.

We believe—and the Congress has indicated that it, too, believes—that the States and the services community want and need more freedom to use available Federal support to meet needs they themselves perceive.

In the General Revenue Sharing Act, and again in title XX, the Congress has moved to give concrete expression to that belief.

The $13.2 billion in direct and indirect child-oriented Federal funding we identified in the 1974 budget almost equaled the entire $13.4 billion in Federal spending for all domestic programs in 1952.

I need not emphasize to these subcommittees the extremely rapid growth that has occurred in all human resources expenditures since the early years of my Department's existence.

Since the mid-1950's, the Federal Government's share of total Federal, State, local, and private services expenditures has risen from 29 percent to 42 percent.

And in those same years, the proportion of the Federal budget devoted to human resources expenditures has more than doubled from 21 percent to 52 percent.

It is obvious to us that this kind of exponential growth in Federal services expenditures simply cannot continue.

We believe the time has long since come to think not in terms of pumping more dollars into the system, but rather getting more system into the use of the dollars already being spent.

Rather than give us a new categorical program, give us a new multicategorical approach. Let us consolidate, not continually add. And let us not always be terrified of stopping any program.

What we need is not a new fragment in our nonsystem, but rather the building of a system where there is none. We need to develop a social service network capable of taking charge of a human problem—and seeing that problem through to its solution from intake to diagnosis to treatment to evaluation.

We need a system that does not place people with problems where the problem-solving dollars happen to be allocated.

Rather, we need to allocate those dollars in such a way that they can be brought to bear when and where they are needed. In short, we need a system that is not dollars oriented, but people oriented.

That is the principle underlying the Allied Services Act—and, we think, one of the fundamental principles underlying the Child and Family Services Act.

But unlike the Child and Family Services Act, the Allied Services Act would not create a wholly new categorical program. Rather, it would, on a demonstration basis—

> Coordinate some of the narrow categorical Federal grant programs now serving single needs of children and families, into broad, substantive approaches to problem solving, permitting States and localities greater flexibility in tailoring available funds to meet their own local needs;
>
> Simplify program requirements, and reduce bureaucratic rigidity and complexity, thereby freeing money now spent on paperwork for actual delivery of services;
>
> Give the Department the kinds of flexibility we need to promote the development of integrated services; and
>
> Enable State and local agencies to pool planning, management and information functions—making it easier to provide at the right time services to the right target populations.

That is what we mean when we say we need to put more system into the dollars now being spent, rather than to put more dollars into the system.

And that is what we mean when we ask the Congress to weigh very carefully the consequences of any action to build a wholly new program, or spend wholly new dollars, on top of the programs and dollars already being devoted to many of the same problems the pending proposal is intended to address.

Mr. Chairman, I am accompanied today by Stanley B. Thomas, Jr., Assistant Secretary for Human Development; Mr. John C. Young, Commissioner, Community Services Administration of the Social Rehabilitation Service; and Mr. Paul B. Simmons, Special Assistant, Office of Deputy Assistant Secretary for Welfare Legislation.

I have perhaps gone too rapidly in my desire to spare the committee as much time as possible, but I will be delighted to elaborate on any of these points in the course of your questions.

Let me say I appreciate very much the opportunity to appear before you and present our views.

Mr. BRADEMAS. Thank you very much, Mr. Secretary. We will call first on Senator Mondale.

Senator MONDALE. Thank you very much, Mr Chairman.

Mr. Secretary, I think what is dividing us is simply a question of delivery systems to be worked out as we did in title XX.

There were difficulties, but I think we developed a system which finally was satisfactory to the Department and to which you make reference in your testimony.

Where I have trouble with your position is that I think it ignores or largely ignores the needs of people that we are facing.

In the last 20 or 30 years, there has been a dramatic increase in the number of working parents, families in which both parents work, and an equally dramatic if not a frightening trend is the number of single-parent families.

Over half the families in America now either have both parents or the single parent in that family working, and there are over 6 million preschool children who belong to those families, not counting the schoolchildren who may not have anyone caring for them in the afterschool hours.

It is a trend that is traumatic. It is a trend that is very dangerous to the future of this country because of what could happen to children if they are unattended and uncared for. I personally prefer the family in the home. We are confronted with the fact of what we do.

That is where I find the position of the Department lacking.

I would like to discuss what we expect a mother to do. Let us take the typical mother who is a widow with two children in an average city in the United States.

According to our figures, if she works, she will make about $6,175 a year, unless she decides not to work and go on welfare, in which case, she will have about $3,600 a year from AFDC, which I think we will all agree is clearly below the poverty line and disastrous to all children.

Her first problem if she works is what should she do with the kids. What do you propose be done with the children?

Secretary Weinberger. Senator, I think you assume, because we are against this bill, we are opposed to day care and child care and we are opposed to working mothers and do not want to do anything about the problem.

The whole point I am trying to make in the statement is that we recognize that is a problem. We do not think creating a new network in which the Federal Government imposes its will on local agencies and bypasses the States and all of the other agencies and spends another very large sum is going to address that problem.

What we have here is $13.2 billion available for various child-care services. We are not using it very well because year after year the Congress has taken the approach of this bill, to drop one after another new program—and I think this is the very worst—on top of all the ones in existence.

It is not that this thing is going to solve the problem of the working mother at all. What this is going to do is put another $1.8 billion into the uncoordinatedness that we have right now.

What we need to do is something like the Allied Services Act: Say to the States and cities, and various local units, "Here are a lot of Federal funds, you know your priorities, you know your working mothers, you know what has to be done better than we do.

"Instead of binding you into the narrow boundary lines that we have at the present time with these 200 programs and with this fine available money, a lot of which is being wasted in duplicative overhead and administrative costs and rules that do not fit many communities, why don't we give you a little freedom to use those available funds?"

The theory that adding something new is going to solve the problem when you are not abolishing anything in existence, when you are dropping it on top of 200 programs that are there is an assumption that I think has no validity behind it.

You are not going to help the working mothers. We want to do that. We believe we are doing that.

Senator Mondale. Do you have the evidence that you want to do it?

Secretary Weinberger. You certainly have plenty of evidence.

[At this point, Secretary Weinberger referred to the Department's central role in formulating the Social Services Amendments of 1974 (Public Law 93-647). The Secretary noted that the Department had cooperated in developing the legislation with the Congress, the States, and national social service interest groups.]

Senator **Mondale**. We had to force this over your dead body.

Secretary **Weinberger**. No, sir.

Senator **Mondale**. I know who did it. You were opposed to it. You were trying to tie it down. You fought day-care standards and now you are trying to take credit for what we did.

Secretary **Weinberger**. That is totally wrong. We have had a very good cooperative effort.

Senator **Mondale**. After 2 years.

Secretary **Weinberger**. It took—you have to remember that it started with the Finance Committee recommendations, that a great many of the social services benefits be, as they put it, tightened up.

Every time we tried to meet the Finance Committee objections, the other parts of the Congress would object, and it did take 2 years.

However, we now have a system that I think would provide a high degree of State flexibility which you were instrumental in helping us get and which we supported thoroughly.

It was not over our dead bodies. We were anxious to provide day care and in all of the original versions of departmental regulations for day care and child care, we had a very substantial addition to the number of children receiving it.

If you want to go back further than that, when I was in the California legislature, I actively supported bills that created day-care and child-care centers.

We are not against them, but we are against raising a lot of false expectations by saying, "Here is a new wheel, this will solve everything.

What you are now going to do is create the 201st program and drop it on top of everything else that is in existence and somehow put some coordinating committee or some parents council together that will make it work.

It will not work; that is why we are against it.

Senator **Mondale**. Of course the delivery system this bill embodies is patterned on the system that works very well, called Headstart.

Secretary **Weinberger**. Headstart does work very well. It is one of our best programs and one of the reasons it is one of the best programs is because of the care with which it has been administered and the fact that it is a demonstration program that is pointed specifically to disadvantaged children and that it is designed on an individual basis where the indivinals running it are given a substantial amount of discretion and where the State and various other people are given very substantial amounts of authority.

Mr. Thomas administers that program. He administers it very well and he can elaborate on the differences between that and what is proposed here.

Senator **Mondale**. Can we get back to that mother that we started to talk about 15 minutes ago. What is she supposed to do? Is there day care for her which is available?

Secretary **WEINBERGER**. There is a very substantial amount of day care available.

Senator **MONDALE**. What are her chances today of getting day care?

Secretary **WEINBERGER**. I think her chances of getting decent day care are very much better than they were a few years ago.

Senator **MONDALE**. About 1 in 6, are they not?

Secretary **WEINBERGER**. No; I think it is considerably better than that.

Senator **MONDALE**. We have heard from applicants for day care; we have heard from mothers; we have heard from parents all over this country; and they all say the same thing. They cannot find decent day care. What is the mother supposed to do?

Secretary **WEINBERGER**. What I suggest to you, Senator, is that she is not going to be helped by another network that drops another set of categorical programs on top of everything that is in existence now.

What is going to help her and what would help her most would be something that coordinates the $13.2 billion that is floating now in 200 programs and concentrate it on local needs that would give New York the opportunity, if that is where the problem is, to put more dollars into it under title XX.

Under title XX, the States can shift as much of the title XX money as they wish into day care and the Federal Government will match it. There is no reason to suppose that brand new categorical program is going to solve any local problem.

Senator **MONDALE**. Are you arguing there is enough support available now for adequate day care?

Secretary **WEINBERGER**. Yes; I am. If you would give the States and communities and ourselves the flexibility to use the resources that are there now instead of tying them up into these narrow categorical programs with all of the boundaries and guidelines, that require us to use so much of this $13.2 billion in administrative and overhead and unnecessary costs.

If you would pass something like the Allied Services Act and move toward the direction which you very hopefully pointed in title XX, then we would be able to do a great deal more for a great many people.

Senator **MONDALE**. Somehow your rhetoric does not seem to square with reality. We know from the statistics we have from your Department that only 1 of 6 preschool children with working parents have any licensed day care slots available to them.

You say, well if we pass the Allied Services Act, they would all have day care.

Secretary **WEINBERGER**. I said you would have a great deal better chance of it. You should also bear in mind Senator, that a lot of parents do secure day care, not at day care centers, but in other private homes and in a number of situations which they greatly prefer.

Senator **MONDALE**. That includes licensed home care?

Secretary **WEINBERGER**. There is a lot of day care that is being provided outside of the formal institution. There could be more, we need more and we can get more in a far better form if we would not just continue to try to deliver these things to people in 201 categorical programs.

Senator MONDALE. Let us take the situation then of this poor mother out there to whom we have sent a copy of the Allied Health Services Act.

What is she going to do?

Secretary WEINBERGER. It is pretty useless to send it to her because we have sent it to the Congress for 3 years and nothing has happened. If it were passed, it would enable a great many more resources to be made available right now without more taxation.

Senator MONDALE. Is there any more money in that act?

Secretary WEINBERGER. In that act, there is better than more money. There is flexibility, to use the $13.2 billion in a way that is far more effective than we are forced to channel it now through 200 programs.

It is the same basic approach as title XX and revenue sharing. It gives flexibility and freedom to spend on local priorities, determined locally, not by the Secretary of Health, Education, and Welfare, determining some 10,000 prime sponsors and doing all of the competing, decisionmaking necessary for that, and setting up a parents council at each one of them, plus all the other kinds of bureaucratic machinery that will not work.

Senator MONDALE. I think the mother is still out there without day care.

Do you suggest in your testimony that the income tax deduction is of any use to the average mother earning $6,175?

Secretary WEINBERGER. It is of some use. It is of use to a great many people, and evidently the Congress thought it was of use because they passed it for families with income up to $44,600. It is apparently considered of some use in the total expenditure of about $340 million which it adds to the general total available in this area.

Senator MONDALE. I am trying to be practical. That mother gets I think $120 after taxes. Will that buy much day care?

Secretary WEINBERGER. The day care it will buy, depending entirely on her income, may be free for her under the Social Services Act, title XX. A great deal of the social services for people in that income level will be without charge, without fee.

Senator MONDALE. I think the last time this was tried was the parable of the loaves and fishes where you could take limited resources and somehow by magic we would have more.

Secretary WEINBERGER. There is no magic here.

Senator MONDALE. The reality in every State in the Union is that we are asking parents, particularly single parent families, to choose between welfare and work.

If they choose welfare, they are attacked on the grounds that they have no pride, that they are living off the sweat of others who work.

If they work, many attack them on the grounds that they are not good family people and now we ask the children to be cared for somehow, some way and mostly my opinion, through political rhetoric.

In addition to that, there is a problem, not just for working parents, but there is a very profound and unsolved problem in this country of millions of children who grow up cheated and disadvantaged with not enough to eat, without decent health care, without decent education and are simply robbed of a chance for a decent life without ever having had an opportunity.

I have been on this committee for many years and the approach of the Department has been the same every time. We do not need any new money, the money we are spending is wasted, reorganization, reshuffling of the administrative bureaucracy should be the task and so on.

I sometimes wish the Secretary of HEW would trade places with the Secretary of Defense because they are always down here asking for more and you are always asking for less.

It does not seem to make any difference how much they waste, they always ask for more. The other day they came up with $1.2 billion for a nuclear frigate and that would fund this program for a full year.

That program is so bad even the Department of Defense is against it and that has to be something. The Secretary of the Treasury comes up here and he wants to eliminate all corporate income tax at a cost of $15 billion a year.

However, when it comes to people—particularly children—we always get no, no, no and I deeply regret it.

Secretary WEINBERGER. Senator, you always cast these things in terms of who is the most compassionate and you as the sponsor of this bill like children and I as the opponent, do not.

To be perfectly frank about it, that is a lot of nonsense. What we have here is a proposal that is designed to do something you want to do and that I agree should be done, but we have different means of going about it.

To cast it in terms of whether or not one is more compassionate than the other or whether or not we are against children and you are for them, I think is not only totally wrong but it deprives the children of a very real opportunity to get something a great deal better than they have now without all of the burdens and disadvantages of this bill.

How you feel about creating the 201st program for the first time and putting the Secretary of HEW in the position of determining which 10,000 or 15,000 prime sponsors should win the contract, so to speak, a program that will have $350 million startup costs, in training and personnel, how do you think that is going to help children or mothers? It is beyond me.

When we have $13 billion available, if you would only let us spend it in a more effective way, that seems to be something that would help children and parents and the entire community.

However, to assume that because this particular proposal is here, and that everybody who is for it are the only ones who are for children and for all things good, I think it quite false to say nothing of being quite unfair.

The other problem that I encounter as frequently as you say you encounter before this committee is I do find myself talking a great deal about the defense budget, because inevitably a human resource type hearing turns into a hearing about defense.

The introduction of the Treasury proposals this morning is a new note, but I do not know why we cannot confine ourselves to what is the point that is before us which is, should this bill be passed or not, not whether someone's motives are good, bad, or indifferent.

I yield to no man in what I believe is the purity of my motives and I think we are just as concerned with these problems as everyone else here.

I give everyone the courtesy and kindness of assuming that their motives are of the best. It is a little strain with a bill of this kind, but I still do it because a bill of this kind, it seems to me, cannot help anyone it is intended to help and it would simply be primarily of use to the thousands of new additions to what we might call the education-welfare establishment without doing any real good for the people who are supposed to benefit from it.

I think we have a lot of money out there. I think we have a lot of need out there and I think dropping a whole new huge network of this type and at this cost on top of it is not going to solve the problem and will waste more than we are doing right now.

Mr. BRADEMAS. Mr. Quie, whom we are pleased to welcome back.

Mr. QUIE. Mr. Secretary, that statement always refers to problems we have in getting more categorical programs.

I am not convinced that the Allied Services Act in itself would solve our problems.

I share your concern over adding another program. Before I say what I'd like to see, I'll say I doubt the Allied Services Act is going to be passed by the Congress.

If we are going to act in the area of child care legislation, then it seems that we ought to try at least to solve the problems that affect child care so that we could have a more streamlined and effective program.

Head Start, which started out as an OEO program and now administered by the Division of Child Development under Mr. Thomas, has one delivery system mechanism.

Then you have title XX, social security, and title IV, the WIN program, which are the primary child care ones that you mentioned.

You mentioned 200 programs, but these 3 are probably the primary ones.

Secretary WEINBERGER. They are very big ones, yes.

Mr. QUIE. How do you judge the delivery system of the programs that operated under social security as compared to the ones in the Office of Child Development?

Secretary WEINBERGER. The social services amendment that is now in force is new and we are just starting to get the services coming in under it.

My own feeling is that Head Start is a very well administered program and I think it does more direct good than a great many of the things that we try to do.

One of the reasons that it does is that we give very substantial flexibility to the operating agencies that run it.

We have some comparison we can make between when we had to fund Head Start directly and we had to fund Head Start through a community action group.

There the balance was very heavily weighed in favor of the ones that we were able to fund directly. Simply let them run a Head Start program rather than running through a very large administrative overhead network that the community action programs require with neighborhood organizers and the rest.

We can get more money directly into the benefit of the children when we fund the program directly through organizations that run Head Start programs.

With the social services programs, I would be very hopeful that under the new title XX, with the flexibility that it gives the States and local units, we would get the same kind of good result.

Mr. QUIE. With general revenue sharing, we have the greatest amount of flexibility of all programs with Federal aid?

Secretary WEINBERGER. Yes.

Mr. QUIE. Is any of that going to child care services?

Secretary WEINBERGER. I have not seen all of the statistics on it. Maybe some of the people who accompany me can add to that.

Some of the local groups—some of that money is forbidden to be used for educational benefits.

Whether the States are using it directly for child care services or not, I do not know. They are using it for a number of things which appear to them to be of high priority.

Mr. QUIE. With the local areas, is there a prohibition on general revenue sharing?

Secretary WEINBERGER. Yes.

Mr. QUIE. For child care?

Secretary WEINBERGER. The line is fairly thin between child care and education. You are providing educational programs in a child care setting and if you have one where there is no education whatever provided, then the funds would be available for that use.

However, you have to bear in mind Congressman Quie, that when Federal funds are available for other programs, that States, cities and counties would not tend to use their free funds for that.

They tend to use them for other things and that is one of the distortions that is frequently created by the categorical programs that the Federal Government has been imposing.

Mr. QUIE. You indicated that we should not leave the decision to those who are furthest away from the problem. But, one of the difficulties we face is where we provide the most flexible money, general revenue sharing, it does not go for child care programs.

Mr. BRADEMAS. Will the gentleman yield to that point?

Mr. QUIE. Yes.

Mr. BRADEMAS. Just to comment on Mr. Quie's question, Mr. Secretary, in the Congressional Record of June 11, 1974, page 547, I included the responses to inquiries that I had asked the General Accounting Office to make with respect to the use of general revenue sharing funds by local units of Government for three different kinds of persons, handicapped persons, children and the elderly.

With respect to Mr. Quie's questions, at least based on the definition of the GAO report, which was couched on a survey of 250 local governments for revenue sharing funds for calendar year 1972, these authorizations totaled a little more than—these expenditures represented a little more than 1 percent for children's programs.

Secretary WEINBERGER. You have to bear in mind, Mr. Chairman, that you do have a very substantial amount of Federal funding for those other programs and it is a natural tendency for the States and counties to rely on Federal funds for those programs and then to use their freer funds for other needs as they saw them.

The general revenue sharing funds were about $6 billion for the country as a whole and these other programs are very much larger in many cases.

What they would quite normally do would be to see what is sponsored by the Federal Government and then use the revenue sharing funds for other things.

The other assumption in that question, and then the conclusion I think you draw from it, is that somehow we know better what their particular priorities should be and that is an assumption, as you know, I challenge.

Mr. QUIE. This is a problem of general revenue sharing. In education, even on a local level, we do not assume that the county commissioners know best or the mayor knows best or even the Governor knows best.

State education money goes through a State board of education and commissioner of education, and local education money goes through the school district and the school board.

The assumption that you should select individuals because of their interest, capability and in this case, education——

Secretary WEINBERGER. These are local units. These are local school boards who are elected as the most representative units that we have and the others will make decisions of that kind in the States because they put about half of the money in most States into the local school systems.

The school systems obviously have some say but in addition to all these funds we have been talking about under title XX, which is another type of revenue sharing approach, over $1 billion will be spent for these services by States by their own determinations.

You just cannot look at the general revenue sharing funds and say that is all the funds that States have discretionary determination over and they are spending 1 percent of those funds on social services. That is not right at all.

They are also spending another billion roughly of their own money on many of these services under title XX.

Mr. QUIE. Is that not because they administer that money through a welfare department and a local welfare agency rather than by turning it over to the mayor or Governor to make the choice of whether or not they want to use it for snow removal or welfare programs?

Secretary WEINBERGER. The determination as to how it is disbursed and under whose authority locally, is a determination I would prefer to leave up to the States.

If they want to do it through the Governor or through the mayors for the city and county portion, if they want to do it through the city council, if they want to give it to an independent welfare director, I think that is a decision they should make.

Some do it one way and some do it another. My desire is to rely, because I have had some local experience and some State experience, on people who are the closest to the problem and if the choice initially made is unpopular, wrong, or if they want to change it, they have an opportunity to change it.

If they assign it to a local school board and they want to give it to a State school superintendent, that should be up to them to do.

We should not, as a Federal Government, say every State must do it this way, every person must do it this way or even worse, as in this bill, the Secretary of HEW must go directly to license, charter, and monitor and evaluate tens of thousands of prime sponsors in the administration of each one of the child day care centers all over the country.

That, I think, would be the very worst of all bills.

Mr. QUIE. The Secretary should not deal with the licensing of prime sponsors?

Secretary WEINBERGER. That is what the bill says.

Mr. QUIE. I do not agree with that at all but I also do not agree with absolute flexibility, which seems to be what you are contending would be best.

We both see the need to improve child care services and to provide some assistance by the Federal Government, although there is not an agreement on the level at which it would be.

We have a responsibility to see that it goes for that purpose rather than for building bridges.

Secretary WEINBERGER. If there are funds allocated for child care centers by the Federal Government, then certainly we have that responsibility. We fulfill that and carry that direction that you have given us out by auditing the funds and all the rest.

The general revenue-sharing funds are audited and we do not say that there ought to be total and complete flexibility everywhere.

In the Education Act, the bills we introduced, as you know, provide four or five broad categories, and we said, instead of the 60 programs, put them into these four or five broad categories and spend them as you wish within those categories and we will audit on a sample basis and ask you to make sure it is going for the intended purpose.

What I am arguing for is a great deal more flexibility and a great deal more recognition of the idea that people on the scene, locally responsible to local order, know their priorities much better than any of us here in Washington know them, specifically including the Secretary of Health, Education, and Welfare.

Mr. QUIE. The next problem is when we legislate a broader flexibility, the Department seems to regulate far beyond what the Congress directed them to do.

I find that true of the Labor Department and HEW.

Secretary WEINBERGER. I do not think you will find that with our Department. We only adopt regulations we are told we are required to adopt and frequently we argue strongly against the law that requires us to adopt them.

Once the law is adopted, we carry out the intent of Congress and do what we are told and, of course, interpreting the intent of Congress is a little bit difficult because each person you talk to has a different idea and insists that is the intent.

Under those circumstances, we have to rely on our general counsel and so on. I assume you are referring to title IX? In this case, we relied on a general counsel interpretation.

I personally begged the Congress to grant us the exemption which they finally did with respect to Girl Scouts and Boy Scouts.

Otherwise the breadth of that statute and the way it was drafted would have required us to force Girl Scouts into Boy Scouts troops and vice versa and that obviously was nothing anyone wanted.

But you cannot say because it is silly, it is not the intent of Congress. You have to get a specific exemption and that is precisely what we finally did.

I think we may have to do that in a number of situations.

Mr. QUIE. This is what I find is the problem. You want to gain the authority and power of regulations up to the point that the Congress does not prohibit you. We have to write legislation to keep prohibiting you from going beyond what we intended.

Secretary WEINBERGER. No. When you say there shall be no discrimination in the classrooms, it is very difficult for me to sit down and say that does not mean a physical education classroom.

Mr. QUIE. We did not say that.

Secretary WEINBERGER. I felt you did. That is what our General Counsel told us you did.

Mr. QUIE. Then you have some General Counsel. We said you should only do it in programs and activities funded by the Federal Government and I do not believe we fund any Boy Scouts and Girl Scouts.

Secretary WEINBERGER. You do indeed if you call those programs educational programs, and they believe they are educational programs.

Mr. QUIE. Would you call them educational programs?

Secretary WEINBERGER. They think they are and we think they are.

Mr. QUIE. The mere fact that they happen to use a classroom in which to hold their meeting, does that necessitate integrating Boy and Girl Scouts?

Secretary WEINBERGER. No; it was a much more direct relationship. All we need and all we have asked for is a rather specific direction with respect to what the regulation should or should not contain or what the statute does or does not do.

I understand fully, having participated in the process, how difficult it is in the closing rush of an adjournment or something of that kind to miss a few commas and semicolons.

However, I do not think the Department should be blamed when we enact regulations that are based upon that kind of legislation and if there is a change desired, then the legislation should be changed and not a couple of paragraphs in the committee report saying the Department is doing the wrong thing which normally is the way the attempt is made to change it.

Mr. QUIE. If this was the first time, then I would say that was just one error. However, it has been so glaring in various administrations through the years that it was necessary for the committee to put in the O'Hara amendment so that Congress can look at the regulations.

Secretary WEINBERGER. So far we have been in agreement with what the Congress did.

Mr. BRADEMAS. Mr. Secretary, if I might just follow the line of questioning that Mr. Quie used. Before I put some specific questions to you, I do think your line in this specific legislation is typical of what I have perceived during the Presidency of Mr. Nixon and continuing into the present administration.

It has represented two fundamental kinds of differences, between the administration and a number of us, I think, on both sides of the aisle up here.

One has to do with priorities. Namely, given the scarcity of resources, which is the appropriate way for the Government of the United States to expand those resources and on this reasonable people have reasonable differences of opinion, which is what democracy is about.

Here I think the record will show under Mr. Nixon's administration and under the present one, a fairly consistent hostility, if one goes back to Attorney General Mitchell's statement, "don't pay attention to what we say, but what we do," if one looks at the record of budget proposals, of authorization proposals, of decisions and deferrals, the record of this and the preceding administration has been consistently hostile to the kinds of human resources that this particular bill represents.

I am familiar with the old debator's trick of talking about how great a percentage of Federal moneys flow into human resource programs because if one starts to break it down one realizes that social security and other elements come into it.

However, I think we are just in fundamental disagreement about some of these matters.

Secretary WEINBERGER. May I comment on that?

Mr. BRADEMAS. Let me make my second point and then you may wish to comment on both.

My second concern in some ways is still deeper, and I really had not planned to get into this, but I followed Mr. Quie's questioning and I have been struck by what you said by the ferocity of your statements today, on the use of language like "push State governments to the sidelines," "we demand a veritable army of Federal bureaucracy," "most blatant duplication."

Secretary WEINBERGER. You should have seen me a couple of years ago.

Mr. BRADEMAS. This is very intensified ideological rhetoric, and I think it has characterized, if I may so say, and I say it to be accurate in describing much of President Nixon's philosophy, and I think your own stewardship at HEW, and in Secretary Kissinger's at the Department of State. I for one find a very common thread which is enormous hostility to the existence of the Congress of the United States.

I was one of the few Members of the House honored with being on the White House enemies list, so I put my conflict of interest right out on the table.

I am obviously expressing my own views, Mr. Secretary, and all of this rhetoric of power to the people and getting governmental decisionmaking back to the local level where the people really know best, because under the Nixon administration, we saw immense concentration and centralization of power in the White House under Mr. Ehrlichman and Mr. Haldeman and some of the others.

At the same time, there was all of the move, we were told, toward decentralizing the power through revenue sharing and through similar approaches.

In my own judgment, and here I am trying to speak not only as a politician but as a political scientist, this combination of those two devices, coupled with the other business that we now summarize under the generic term of Watergate, represents the most savage assault on the Federal system, as well as upon our constitutional separation of powers system, that the American democracy has known in nearly 200 years.

I for one regard a good deal of the underlying philosophy, Mr. Secretary, that you expressed in defending your own position in the bill under consideration, as part and parcel of an ideological viewpoint to which you are, of course, quite entitled but that is a carryover from the really profound hostility toward the Congress and toward our kind of constitutional system.

Maybe that will give you enough to reply to.

Secretary Weinberger. It gives me a great deal to reply to, Mr. Chairman, and I think I would like to start with the last part rather than the first.

Equating a perfectly reasonable political philosophy which I have had for many years, and which I still have, with a lot of criminal nonsense that took place down at the White House is, I think, the cheapest of cheap shots, if you will permit me to say so.

It is indeed one of the saddest legacies of Watergate that you now find people as yourself in responsible positions who seem to feel that anyone who has a basically conservative philosophy and is willing to express it, that that person, therefore, has to be associated with or have some kind of comments made about what a few criminals did down at the White House.

I want to say to you and I want to say to the American public as part of this, there is no connection between the two. It was a lack of philosophy at the White House that caused most of the problems that went on down there, and the difficulties that were caused to the administration and the American public by that lack of philosophy were manifold and manifest.

However, they had nothing to do with conservative philosophy.

The American people in 1972 asked for a basically conservative administration, and it was a very sad and unfortunate thing that the desire was eroded by all of those other totally irrelevant criminal elements.

Obviously, I do not like to have the association of the two made, as you have done.

With respect to hostility to the Congress, that is totally incorrect. We have had all of these arguments as to the enormous accretion of power in the White House and the executive branch, and to my mind that is so much nonsense.

Presidents have not been able to do more than block various kinds of unwise approaches of which this bill is one of the prize examples. You do not have an accretion of power: all you can do is stop approaches that we know perfectly well from the basis of years of experience are not going to work and are going to cause more trouble than otherwise.

We are not hostile to the Congress. We do believe we have an obligation to point out some of the things that the Congress might well want to do and some changes of direction that they may well want to take.

We are perfectly willing to work within the framework of the system, and we have done that, and I have done that during all of the time that I have been in Washington.

I think the important thing here is that we oppose another approach because we know from our past experience that it is going to do nothing but waste money, add confusion, and build expectations that cannot be possibly fulfilled.

It is symptomatic of the times that that is automatically attacked on the basis of motive, and I think we may well have moved from the period which some of your predecessors referred to as the Age of Camelot when all things were possible to an age when all things are suspect.

I think there is a great deal of harm in the country from that kind of approach. I would suggest that you have squeezed all of the political advantage out of the criminal actions that went on in the White House during those years.

I think it is time to turn to the merits of the subject and not drag that out day after day when it does nothing but defame people who were not involved or who should not be tied with it. Nor should there be any attempts to continually put that before the country as the equivalent of conservative philosophy or philosophy that puts limits on the knowledge of local people and local governments.

On the first part of your point where you talk about wrong priorities and that we were hostile to all of the social programs, as you suggested, the figures obviously belie that, but what we were hostile to and what I am hostile to is the rate of growth, the mindless increase in program after program after program, the precise performance we are going through here today where we are considering another $3 billion program or whatever it turns out to be without any thought whatever being given to any of the rest of the obligations except a few casual references to the defense budget being too large and that kind of argument.

It is time that someone worried a bit about whether we are going to destroy the fundamental strength of the American system by turning it from a private free enterprise incentive type of economy to an economy where 50 or 55 percent of the GNP is devoted to domestic social programs alone.

If you get that, and this is one of the roads to that, then you have pretty well destroyed the ability of the economy to provide the jobs that are the only solution for the people who really are in need.

You will not have to worry so much about working mothers because there would not be the jobs for anyone, mothers or otherwise, if you add this kind of heavy Government involvement.

Mr. Chairman, yes, I am hostile to the rate of growth. I am hostile to the mindless consideration on a piece by piece basis of each of these proposals as it comes along with no one bothering to stand up and look at the overall picture.

I am extremely hostile to the suggestion that anyone who has that kind of viewpoint is somehow part of criminal activities that went on in the years past.

Mr. BRADEMAS. Mr. Secretary, you have greatly exaggerated what I said.

I did not accuse you of criminal activities; if you will go back and read the record, you will see that is the case.

Secretary WEINBERGER. I did not say that but you made a very cheap shot of associating the philosophy and ideas involved here with the Watergate mess and that is enough usually for a first edition and that is what I am worried about.

Mr. BRADEMAS. In all candor, I had not even planned to get into that until I saw your testimony. I do not back away one minute from holding to the position that the general approach taken by the Nixon White House toward the Congress in respect to its domestic programs was part and parcel of its other activities which were designed to undermine our constitutional system.

Secretary WEINBERGER. I am speaking of this President. I am speaking of President Ford on this bill and I do not see how any of this other stuff is in any way relevant.

Mr. BRADEMAS. I am astonished however that you should talk about the lack of philosophy. I made a note of it. You say the problem was just a few criminal idiots at the White House, would that have been the case, and the problem was, you said, Mr. Secretary, "a lack of philosophy at the White House".

I have tried to make and we are obviously in disagreement on this point, that there was a philosophy at the White House and that it expressed itself in activities that were certainly quite legitimate in terms of expression of philosophies toward the Federal system and to its Congress.

However, it also found expression in ways that were not appropriate under our system. Let me ask you a couple of questions about the bill under consideration.

I first would simply go back to the point that Mr. Quie made that I think there is a degree of romanticism on the right, if you will, about the joys to be derived from refusing to face up to any particular social need and to try to in some soundly based way to develop systems for meeting those needs.

You used two or three times the question with the phrase "mindless increase." That is a good example of what I said about the hostility that you and your associates have evinced toward Congress.

You can disagree with us. I do not regard you as a mindless person, Mr. Secretary. I think you have thought about your position. For your information, some of us have thought about ours.

Secretary WEINBERGER. What I have in mind, by that Mr. Chairman, was the fact that this committee is considering this proposal totally in isolation.

We report to 21 committees and subcommittees of this Congress on public assistance programs alone and I get the feeling that none of them speak to each other at any time because they do not seem to have any kind of coordinated approach to this whole problem.

That is what I am arguing for here. That problem is what I consider to be mindless.

Mr. BRADEMAS. I am totally in agreement with you on that point. Obviously any rational person would be in favor of greater coordination of limited resources but I must say that when Senator Mondale expressed a similar point with respect to a broader canvas, namely that one has to look at the need here against the needs of the Department of Defense, you shot him down rapidly or attempted to by saying you are here just on HEW, why are we getting into other matters.

If we are going to, you cannot have it both ways is all I am saying, Mr. Secretary.

We, as Members of Congress, have responsibility to vote on matters that affect the Department of Defense and that affect other aspects of our Government so we have to look at the matter not in a mindless way, but with an overall view.

Let me give you a couple of specific questions on the bill and then I will yield to my colleagues.

You note, and I am frank to say, that you quite deliberately exaggerated what you perceive to be the deficiency of this bill.

Secretary WEINBERGER. These—there are no exaggerations. That is what I perceive will be the case if it is enacted.

Mr. BRADEMAS. On page 4 of your statement, I believe you say that the bill would create a new Office of Child and Family Services and yet, Mr. Secretary, if you are straightforward with us here today, the fact of the matter is that the bill would provide for the assumption of the responsibilities of the present Office of Child Development.

That is really not duplication.

Secretary WEINBERGER. The statement is completely correct, Mr. Chairman, because the bill specifically provides that a new Office of Child and Family Services is to be created within the Department, the Director shall be nominated by the President and would be outside of all existing structure of the Department.

That Director would be subject to Senate confirmation. The entire area of activity would be administered in a way that is totally different from what we are doing now and it is not in effect at the present time.

I do not think it would be an exaggeration to say that the bill would require a new Office to be created.

Mr. BRADEMAS. I am trying to give some attention to the meaning of the English language. Just leaning on a point like that I think reinforces my earlier observation that you are straining—you ought to be able to have enough rational differences of opinion on the bill without straining for ones like that.

Secretary WEINBERGER. There are a great many but you are the one who picked out that one and said exaggerations. Since the bill mandates a new office, I do not see that saying the bill mandates a new office is an exaggeration.

I agree that it may be one of the lesser points or problems with the bill, but since it is the one that you picked out I think it is proper to point out that the statement is accurate and not an exaggeration.

It does require a new office to be created.

Mr. BRADEMAS. Let me turn to another issue. You say in your testimony, "a veritable army of Federal bureaucrats would be necessary to form the planning which indeed is being done by the Government right now."

I know of no one who pays attention to these matters who would accept a proposition that such activities are being done by the Government right now in the sense in which I infer, you mean and tell me if you think I am wrong, that they are being done adequately.

I refer you to an audit report that was issued a year ago by your own Department on child care programs under title IV of the Social Security Act which shows very clearly that the 68 Federal interagency day care requirements are not being met at all.

However, all federally funded programs are supposed to meet these requirements. I can cite you particular chapters and verses of which you might be aware.

Secretary WEINBERGER. I spoke of that in testimony here and in the report. That audit report is exactly part of this programmatic planning and coordinating and monitoring that is being done by a number of these Government agencies right now.

Obviously there is no question that everyone could do everything they are doing better and that would certainly apply to these, but under title XX, we have—until title XX was enacted, we have not really had any kind of enforcement mechanism.

Title XX fortunately worked out a compromise between the Congress and the Department and does provide for a 3-percent penalty for failures to comply with the requirements or these acceptable standards.

I think we will have a much better chance.

Mr. BRADEMAS. I have many other questions, Mr. Secretary, but I have taken too long and I yield to Mr. Jeffords.

Mr. JEFFORDS. Mr. Secretary, I have listened to this interesting conversation and it is a typical confrontation we are having on policy.

Let us assume two things would occur: One, the act were not passed; and two, the Allied Services Act would not pass. Also, assume that Congress would say that priorities would indicate we ought to spend $1 billion more as exactly is the case in the area of child care services. What would you recommend that we do in that situation—particularly what programs would you expand, what programs would you do away with? I would like particularly your comments on our Follow Through program.

Secretary WEINBERGER. I certainly think we want to expand the Follow Through program which is a good one but which has been small and on a demonstration basis, thus far.

I would want to expand Head Start which I think has been one of the most successful ones. If you gave that additional funding, I would think some of it might well go into title XX additional day care services there.

I would also want to put some more into the early periodic screening, diagnosis and treatment program which I think is the most hopeful of various health programs.

Mr. JEFFORDS. Are there any programs of the sums you briefly mentioned that you think ought to be eliminated?

Secretary WEINBERGER. I can certainly go through them and indicate to you some that should be; yes, but again, it probably would not serve too much purpose to try to pick them out one by one this morning.

What we have is such an uncoordinated effort and so much of an overlap that what I would like to do to get much more of the thrust in the form of what might be called the revenue sharing for social services type of expenditure under which the administration and the selection of projects and in monitoring and all of that is done much closer to the people.

Mr. JEFFORDS. When you say uncoordinated, do you believe the only successful way to coordinate it is at the local level, and that it cannot be done at the Federal level?

Secretary WEINBERGER. Some things can be coordinated at the Federal level and we have made substantial efforts to do that. I think you would get a much better result, not just coordination, but a much better result if local people on the spot, who know the priorities, had much more authority to deal with the situation.

Flexibility in use of Federal funds is the thing that would help them the most. Now categorization makes it so much more difficult.

Mr. JEFFORDS. Thank you.

Mr. BRADEMAS. Mr. Lehman?

Mr. LEHMAN. Thank you, Mr. Chairman, thank you, Mr. Secretary. You mentioned doing away with some of the overlapping Federal bureaucracy.

I have a suggestion. I think if you did away with all of the regional offices no one would miss them.

Secretary WEINBERGER. We believe there is no way to administer a department as large as HEW without heavy reliance on decentralization and we have strengthened the regional offices.

We believe they are capable of assuming much greater burdens. We believe very strongly in decentralization and I regret I have to disagree with you on the very first statement.

Mr. QUIE. We could depend more on the States.

Mr. LEHMAN. Perhaps it would not all be bad. What I find out, working out of Florida, is that so much of our frustration is caused in the various programs by the inability to get the kind of reaction from the Atlanta regional office and various programs.

I hope as you say it has been improved and strengthened.

Secretary WEINBERGER. I would be very glad to work on any specific problems you have.

Mr. LEHMAN. I have not been that active on the local level, but when I was on the school board, I had Head Start and various other programs had that problem and I probably could document that for you.

Hopefully it seems to me perhaps an unnecessary layer of bureaucracy that maybe we can do without and I certainly think it would be worth investigating, if we are concerned with that type of overlapping bureaucracy.

I think you are looking at this perhaps from the standpoint of compassion and I think it is very well we do but in a way that I meet with the people in the district I represent in the lower- and middle-income bracket, that is the most bitter and frustrated group of people in this country.

For instance, 2 o'clock Sunday afternoon, I met with some middle- and lower-income people in high rise apartments who had to go down and get on the bus and go to work every day and except for the plumbing in their apartment, the one thing they are most frustrated about is the fact that they are not getting any services that are available to both the people above and below them.

I think this kind of thing is tearing apart the fabric of our political and social structure. I would like to see programs of this type targeted for those types of people who need them so badly.

Obviously we are in a sense rewarding people for doing the wrong things, like going to work instead of benefiting from welfare.

I would also like to agree with Mr. Quie's statement that delegating to local effort is not going to always solve the problem.

If it were solvable at the local level, it could have been perhaps to begin with. It pays to look into these Federal programs.

However, I find with both school business and dealing with the casework, that part of the problem is that the local effort is so tied up with local politics and local prejudices and local hangups that it is very difficult for them to resolve these problems at a local level without some direct Federal guidelines of some kind to come down to them.

I know we are trying to get out of our metro government additional parks in a section of Dade County that I represent.

It happens that the upper middle management people in the county administration, although they are in a different part of the county, have got five parks more than we have because somehow or other it just does not seem to be adequately distributed.

Even at the local level, unless you can perhaps give some kind of guidelines at the Federal level.

Mr. QUIE. Will the gentleman yield?

Mr. LEHMAN. Yes.

Mr. QUIE. I would like to see the responsibility transferred as close to the people as possible.

What I was trying to get at was that you ought to give it to the group of people who are elected or selected because of their interest in the problem which we are trying to solve with the Federal program. That means when you have Federal education programs or child programs, you do not give the money to those whose primary responsibility is fixing roads, you give it to those whose primary responsibility is education.

Mr. LEHMAN. I can see the necessity of expertise, but I find that local political pressures are very apparent and vocal and very conducive to unfair allocation to Federal services.

Let me just ask you two quick questions. You mentioned—in case this does become legislation—you seem to be opposed to additional advisory groups be tagged onto this legislation.

You think it would be better not to have the advisory groups provided this became law?

Secretary WEINBERGER. The problem we have is that the advisory groups really are not advisory groups. They are policy and power wielding groups.

Mr. LEHMAN. I agree. I just wanted to get it on the record.

Secretary WEINBERGER. I oppose the structure of advisory groups as proposed in this bill.

Mr. LEHMAN. If this became legislation, do you anticipate that private day care centers can qualify and become prime sponsors? If so, would you oppose it?

Secretary WEINBERGER. I think one of the provisions of the bill authorizes that and I again would have to express, first of all, the basic opposition we have to the whole prime sponsorship concept and the direct relationship between them and the Secretary of HEW.

If you are going to follow this course, I would not have any particular feeling at this point whether there should or should not be private prime sponsors. I do not see any reason to suppose they would not do as good a job as some of the public prime sponsors, but that is a detail I hope we will not reach.

Mr. LEHMAN. Thank you very much. I would like to know where you took your speed reading course.

Secretary WEINBERGER. I am afraid I went too fast but I was trying to save the members some time.

Mr. BRADEMAS. Mr. Cornell?

Mr. CORNELL. Mr. Secretary, there are two points on which I initially agree with you but come to different conclusions. It is not philosophical but a practical thing.

As was just mentioned, you are opposed, I gather to the participation of parents in these councils because of the nature of the council.

I throughout these hearings have had reservations about this particular part of the bill primarily because I do not think that you can get parents to participate.

However, your opposition seems to be on the basis that they will have too much participation and too much responsibility and it would seem that you feel this should be left to the professionals.

Secretary WEINBERGER. No, I do not feel any implication of that kind would be right, sir, because my worry is that when you allocate Federal funds or run a Federal program directly as this bill would contemplate, you then turn over responsibility for various allocations of power and decisionmaking to these rather vaguely organized councils, and you are diffusing the responsibility to the point where you are never going to be able to track it down or find out who is actually in charge or running things.

I think when you create advisory councils and then give them policymaking power to wield, then you have rather seriously diffused responsibility and ample opportunity to run programs with Federal funds and administer Federal laws, putting them in the hands of people who are not basically responsible to anyone.

Mr. CORNELL. I notice on page 6 you say there would be added management superimposed.

Secretary WEINBERGER. To say the latter, is sacrosanct.

Mr. CORNELL. Because I note you spoke rather favorably of local school boards and I find in many instances that they could hardly be classified as professionals.

Secretary WEINBERGER. I quite agree and that is one of the best things about it.

Mr. CORNELL. I agree with you and what you said about the multiplicity of public assistance programs and the overlapping. I am sure we are all aware that one was built on the other.

I do not question that they were well intentioned but as a consequence of this we do have this bureaucratic monstrosity.

Your response to it seems to be that the solution is more leeway given handling the programs or the funding and I had to get this in.

It is my view that we ought to have a wholesale revision of the programs and my particular approach to it would be through a negative income tax.

Secretary WEINBERGER. Now we are really talking. I would like very much to join you on that. A negative income tax is not the way I would describe it but what I would most like to do would be to get away from all of these categorical programs, service programs, food stamps and fuel stamps, clothing allowances and the very intrusive social worker approach to it.

I would like to substitute for all of that a straight cash grant program based upon need and measured by income, with a work requirement for people who are able to work.

I am speaking personally at this point. I have previously been speaking for this President, as I told the chairman. I am now speaking for myself and am in full agreement with you as to the ultimate way in which we can vastly improve the public assistance field.

I believe, in other words, that we should trust the people and give them the cash which is what low income people need the most and let them make their own decisions.

When they arise above a particular point of income set by the Congress, and I would have no hostility to this whatsoever, then they would pay income tax.

When they fell below that, they would be given the cash grant and that is the kind of program I think ultimately we would have to come to.

However, we can only come to that if we abolish all of these others. If we place that on top of everything else, then we are finished.

If we can substitute that kind of approach for what we are doing now, which is not effective and not working as well as it should, then I think we would have a vastly better system.

I would be delighted, as a private citizen, to join you in trying to get that kind of thing approved.

Mr. CORNELL. Of course, I have reintroduced a bill, which I think in the long run would make possible more parental care in view of the fact that I think day care centers would not be as necessary in view of the income for the family.

We have to face the practical fact.

Secretary WEINBERGER. One of them is that the Congress is very reluctant, and I say this without any hostility, to repeal anything once it is enacted.

Mr. CORNELL. Another thing is the present occupant of the White House said that he would oppose all new programs.

Secretary WEINBERGER. For 1 year during the time in which he would like to get the fiscal situation of the Government back in shape.

I think that is a justified drastic measure for that 1 year. Unfortunately the example he set was not followed and none of the $17 billion in reductions that he sought will be granted to him.

Mr. CORNELL. It was a very good and necessary try. Now we are facing a situation where we have no guarantee that he would buy anything like this program next year.

We have to deal with it.

Secretary WEINBERGER. I would not put it that strongly.

Mr. BRADEMAS. Mr. Beard?

Mr. BEARD. I would like to make an observation. I have been in Congress 7 months and it seems to me with all sorts of department heads, secretaries that have appeared before different committees, it seems to me there is always hostility.

It seems to be a confrontation between the people and if I understand your role, you are professional bureaucrats and the Secretary happens to be the No. 1 bureaucrat in HEW.

In a sense you are lobbyists for the President. You have a lot of power and a lot of influence on his staff. It seems there are almost three parties, Democrat, Republican, and Bureaucrat.

Secretary WEINBERGER. Let me make it very clear, Congressman. You could not have wounded me more, especially since I am a Republican, not Bureaucrat, or Democrat.

Mr. **Beard**. What I am trying to get to is this. You come here and you have a right to disagree or agree on a bill but I have heard so many different department heads come before us and it is almost like if you do not agree with us that is the end of the bill; it is dead.

You have a right to disagree but I do not think you have a right as the President said in the last address to Congress, there is one foreign policy. He is talking for Kissinger.

I have to run for office and defend my reputation. You can sit here and argue and you have all the professional staff to back you up whether it is right or wrong, but you are a professional bureaucrat appointed by the President and you are a lobbyist for the President.

I think if you can keep that within perspective—things will go fine.

Secretary **Weinberger**. I strongly support the President or I would not be here. If I did not, I would not find it necessary to come.

I think you are factually incorrect in referring to me as professional bureaucrat. I have also run for office successfully and unsuccessfully and I think I am aware of the general problems that you have as a politically elected officer.

We have certain problems with which we are faced also and there are various alternatives to what you say. Some of my colleagues have followed it and they have not attended hearings and have not testified.

When invited, I always come. I formed that practice very early in my time in Washington, something like the first week, and I have followed it ever since.

When I come, I think I owe it to the committees to report to you my personal feelings, as I did with Mr. Cornell, or if I am asked to represent the administration, to do that.

If the administration happens to be in disagreement with the Congress, again I would suggest to you that we do not get anywhere particularly by challenging motives.

In the event there is opposition, it does not necessarily involve animosity, hostility, or emotions. I am very strongly opposed to this bill. I think it is a very unfortunately good example of the kind of incremental additions we have made from year to year over the past 10 to 15 years.

It has brought us to what I consider to be a very difficult position today. I think we are not too far away from where New York finds itself right now and I think one of the reasons they do is because of this kind of addition to the programs, without any backing away and looking at the overall set of problems.

Yes; I disagree. I am against the bill and I believe I have a duty to come and say so.

Mr. **Beard**. That is fine. I recognize your right to be here and testify. No one is trying to question that, but I am just saying in general, I am tired of people coming in the name of all these different departments. As they say, it is repetitious.

With every committee, there is tremendous hostility. It almost appears that we should not even be here. Maybe we should go down there and you come up here.

Mr. **Brademas**. Now you have gone too far.

Mr. BEARD. I have to run for election, defend my record. You can sit there until hell freezes over and not worry about it until the President is in.

If you accept your role as a lobbyist and just discuss your views——

Secretary WEINBERGER. What would you suggest that I do differently?

Mr. BEARD. This hostility with the chairman, I think you can say you are against the bill.

Secretary WEINBERGER. I have no personal hostility with the chairman. He happens to have chosen one of the best universities in the country to attend.

Mr. BEARD. You mentioned a few items.

Mr. BRADEMAS. If the gentleman would yield. We like each other very much but we strongly disagree.

Secretary WEINBERGER. I do think he went too far this morning.

As far as representing the President's views, that is what I am requested to do by the President. If I feel I cannot do that, then I think I should not be here. I do not think there is any built-in hostility or anything of the kind.

If you would like me to come up and agree with you, I have a splendid bill which I will give you. You can introduce it and hold hearings on it and I will come up and agree on it.

It is called the Allied Services Act.

Mr. BEARD. I consider you a bureaucrat No. 1. You are appointed, you are paid, you work for the President. The point is this.

I do not like the idea of people trying to intimidate the Congress. It seems time in and time out you have a right to agree and disagree, but it seems to me in the last 7 months I have had nothing but intimidation from all sorts of department heads, especially Kissinger.

Secretary WEINBERGER. If that indeed is the goal, I could not have succeeded more poorly.

Mr. BEARD. That is it.

Mr. BRADEMAS. Speaking of alternatives, Mr. Secretary, maybe you can comment on this as a possible variant of the approach that is under consideration in the bill.

I understand that one of the areas the administration supports is the area agencies under the Older Americans Act which as you know is also under the jurisdiction of this subcommittee.

These agencies have a responsibility of assessing needs for the elderly for a particular State and in a sense acting as advocates for the aging in such activities as seeking funds from title XX.

What would your reaction be toward the provision by the Federal Government of a similar mechanism for children? I put this to you—I sense that you are opposed from your testimony to this bill.

You indicated you nonetheless want to be put on record as being against children. Would you be sympathetic to that kind of approach?

Secretary WEINBERGER. I think that concept toward the aging is working well primarily because these area agencies that you are speaking of are concerned with the coordinating of existing services that are there which are badly in need of coordination.

I think if we confine ourselves to that kind of approach with respect to children's services, we might have somewhat similarly good results, depending obviously on the areas chosen by the people involved and the good-will with which they approach their tasks.

We find thus far good results on the aging side. The aging area agencies are not setting up a whole new network. They are not embarking upon a new program nor dropping other programs on top of others.

They exist largely to try to coordinate and pull together, concentrate critical masses of resources behind particular kinds of activities.

To the extent that they are in existence, we do not have quite as wide a spread as we would like to have thus far. I think they are working very well and I would like to ask Mr. Thomas if he would like to elaborate because they are under his direct administration.

Mr. Thomas. As you pointed out, Mr. Secretary, the agencies of the aging are created basically to handle the needs of the elderly.

There are about 460 of them that are in operation as of this moment.

Mr. Brademas. Following this, Mr. Secretary, I would ask you for a further comment on a question that has troubled us and Mr. Quie with respect to your Allied Services proposal.

I believe you indicated that there would be no new money but that there would be new flexibility.

Secretary Weinberger. I think there are demonstration funds in the Allied Services.

Mr. Brademas. Yes. It is $20 million from last year I believe. What has troubled some of us about that proposal and perhaps you would comment on this apprehension, is that without providing additional funds, you would put into one pot, as it were, the needs of those whom your predecessor, Mr. Richardson, wished to describe as the "vulnerables" in our society: Children, handicapped and in effect say you scrap among yourselves for those available resources.

Secretary Weinberger. I say that is a question largely compounded of debators tricks. There is not the slightest suggestion that the Allied Services Act was designed to put the money down in some kind of ring, stand by and let the combatants fight for the moneys.

It was designed to try to remove some of the categorical straight-important for that particular year and in that location.

It does not pit young against old or ill against well or anything of the kind. It is an act designed to say, "here are a lot of Federal restrictions and boundary lines. You come up with a plan that you develop locally in which there has been local participation and you may take some of these funds that you could use for these narrow purposes, merge them and use them for this broader purpose."

Mr. Brademas. Assume for the moment the wisdom of providing more thoughtful coordination. I do not think that if you read back answer, you will see that you have responded to my concern.

As I recall, I think you just suggested there is a transfer provision, a certain amount of moneys to be transferred from one kind of program to another and it was precisely that transfer authority that was a major source of criticism.

Secretary Weinberger. I have already done that, and the reason I do not feel that you are making a point is based on the fact that the bill provides that 25 of the 30 percent that might be transferred can only be transferred between programs serving substantially the same population.

We are not going to get into a young versus aged fight at all. The safeguards are the interprogrammatic transfer provisions and are very well built into the program.

Mr. Brademas. We may have to explore this by letter with Mr. Thomas because I am still not clear.

Secretary WEINBERGER. This is essentially what the bill says. It says you can transfer up to 30 percent of funds from one department of HEW to another but that 25 of the 30 percent so transferred can only be for programs serving substantially the same population or for use in providing common administrative support services.

The other 5 percent could be transferred without restriction.

Mr. BRADEMAS. I am still unclear. To return to my fundamental point, assuming that no transfer authority were permitted, let us get that issue to one side.

Secretary WEINBERGER. That is the present situation.

Mr. BRADEMAS. What do you say to the question to the concern and this was repeatedly voiced to our committee, that if you take all of the groups to be served by existing categorical programs—programs you oppose and say we are going to have a new allied services program and put those existing moneys in one overall pot and allow the determinations to be made at the State or local level. I think accurately state your general concept represented by allied services.

Secretary WEINBERGER. There is some considerable exaggeration there but the general tendency is there. That is the tendency.

Mr. BRADEMAS. I am not trying to misrepresent it. I am trying to characterize it accurately and invite you to react to this repeated expression of apprehension rather than your saying "you are just making debator's points."

Secretary WEINBERGER. The apprehension you expressed is that the States will not do the right thing. The right thing is something that you as a representative of the Federal Government, or I, think ought to be done. But I do not think we have the knowledge to say what is the right thing in each State and community.

Mr. BRADEMAS. That is a debatable question. That is not the particular question I am trying to get at here.

Secretary WEINBERGER. As I mentioned before, there is a limitation on the transfers within the broad program areas serving the same population of the same age.

Mr. BRADEMAS. They would be scrapping over the same amount of money. That is all I am saying.

Secretary WEINBERGER. The same amount of money, the amount of money voted for any one or all of the programs each year is a matter that is ultimately determined out of the congressional process interacting with the Presidency.

Mr. BRADEMAS. Maybe we could discuss informally at some point, Mr. Secretary, your present proposal for allied services.

Secretary WEINBERGER. I would like that very much.

Mr. BRADEMAS. As you know, I introduced a bill last time and there was something to be said for one of the purposes of it, namely to encourage more efficient use of scarce resources for these groups.

Let me just ask one other question. In the HEW review of last fall, the article to which I made reference earlier, there is a statement that in our opinion unclear division of HEW monitoring responsibilities has permitted certain problems to develop unchecked at State levels with problems such as child staff ratios, responsibility is further divided between the regional and central offices of each agency.

Perhaps Mr. Thomas can give us an idea of what is now being done by HEW to correct the serious problems that were developed.

Mr. THOMAS. Mr. Chairman, as you know, in the Community Services Act and in Head Start, there is a requirement that the Department review the Federal intragency day-care standards which I am doing and my office is doing in concert with the Social and Rehabilitation Service and the Office of Planning and Evaluation.

The basic responsibility for monitoring the interagency day-care standards is with the Social and Rehabilitation Service and I am sure Mr. Young would like to comment on that.

Mr. YOUNG. Mr. Chairman, at this time the Social and Rehabilitation Service is developing an administrative overview with all States on quality control and business practice control at State and county management level.

We are also participating with other agencies in the Department pursuant to title XX assessing the appropriateness of the interagency day care requirements. That is a report that is due to the Congress in 1977.

Mr. BRADEMAS. Unless there is a question, I am sure we will be in touch with you.

In respect to the allied services bill, looking at the text of the bill in section 302, as I read it, the transfer—the limitation of the amounts which may be transferred with respect to any human service included in such a plan, at least insofar as the administration bill which I introduced, was not 5 percent but limited to 30 percent.

Secretary WEINBERGER. I was speaking of this year's bill.

Mr. BRADEMAS. That bill has not yet been introduced.

Secretary WEINBERGER. No? I believe it has been transmitted.

Mr. BRADEMAS. I wanted to get that clear for the record.

The final point I wanted to make Mr. Secretary is this. We had a very sharp exchange earlier with respect to my own perception of some recent history and I wanted to say despite what my own perception of the interrelationship between and among a number of developments over the last few years, that at no point did I mean to suggest, nor would I suggest now any implication whatsoever on your own integrity or character.

I do not mean to say that patronizingly but just on the last encounter in these hearings, I would not want the record left with any such suggestion.

I recall very well that I made a speech in March of 1973 on Congress and the White House and in that speech I made citations of a number of developments both legitimate and not legitimate, that in my judgment were very bad for the nature of the American constitutional system.

In no way, despite the disagreements that you and I have had, on the substance of policy or the proper mechanisms for implementing policy, do I want to reflect on your own integrity which I feel is of the very highest.

Secretary WEINBERGER. I did not take it as any kind of personal implication or personal characterization of me but I do feel very strongly that there should not be any connection between what is basically a conservative philosophy and any of those other unhappy events.

Mr. BRADEMAS. At this point I order printed all statements of those who could not attend and other pertinent material submitted for the record:

[The material referred to follows:]

NUMS
DEPARTMENT
OF
PSYCHIATRY

INSTITUTE OF
PSYCHIATRY
320 East Huron
Chicago, Illinois 60611
312/649-8050

Division of Psychology
Wieboldt 625

July 15, 1975

The Honorable John Brademas
House of Representatives
Washington, D.C. 20515

Sir:

Thank you for inviting me to submit a written statement of any length outlining my views on the Child and Family Services Bill. I have heard that committee hearings are still continuing, so I assume that my proposals can be included without difficulty. I believe you will find that my statement has some new ideas to contribute.

Sincerely yours,

Niles Newton

Niles Newton, Ph.D.
Professor, Division of Psychology
Northwestern University School of Medicine

NN:bml
Enclosure

RE: HR2966 (Child and Family Service Act)

Submitted at the request of Congressman John Brademas, Chairman, Subcommittee on Select Education, House of Representatives, Congress of the United States

STATEMENT BY: Niles Newton, Ph.D.
Professor, Division of Psychology, Department of Psychiatry
Northwestern University Medical School

Niles Newton is a specialist in the psychology of childbearing and childrearing. She is the author of *Family Book of Child Care* and *Maternal Emotions* and over fifty scientific papers and book chapters. She received her B.A. from Bryn Mawr College and her Ph.D. from Columbia University. She is the mother of four children.

Many young children and many desperate mothers need help. Single mothers, mothers living below the poverty line, and mothers raising children alone after family break-up often have extreme difficulty giving adequate care to their babies and young children. *The basic issue is not the need for help, but how it can best be given to have maximum favorable impact.*

The Child and Family Services Act appears to be based on the belief that free institutional day care of infants and young children will help provide them with better physical, emotional, and intellectual care than now available to many of them. However, past experience suggests great caution needs to be exercised since other instances of institutionalized group care, such as the care of the old, the sick, and the mentally handicapped, indicate a frequent failure to meet the emotional and often even the physical needs of those dependent on care.

Unfortunately, the *facts* regarding alternate methods of caring for young children are not known in the sense that there have been few adequately controlled studies* to discover the broad range of effect of different types of care in the American setting.

Before a major change in the care of young children is sponsored on a nationwide scale, the following crucial questions need major research investigation with the use of test projects. Criteria for measuring differences should *not* be limited to intellectual differences in the child, but should concentrate on objective criteria indicative of general health, resistance to infections, physical fitness, growth, and nutritional status, and should include behavioral measures such as the ability to work cooperatively and to form attachments to or genuine friendships with others. The effect of alternative methods of day care on the stability and cooperation of the child's family should also be noted.

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* Further information concerning the adequate evaluation of innovative programs can be obtained from the basic extensive paper by John Gilbert, Richard Light, and Frederick Mosteller of Harvard University entitled "Assessing Social Innovations: An Empirical Base for Policy," May 31, 1974, which was in part facilitated by a United States Public Health Service Grant 6M15904 and a National Science Foundation Grant 6S32327X1. (Unpublished manuscript)

The following issues especially need testing:

1. *What is the effect of mother-arranged child care versus government arranged child care*, assuming the mother is given personally (in addition to all other payments) the same amount of money that would be spent for the institutional provision of free day care? What sort of care arrangement would such mothers make for their children? Would they form cooperative groups, pay friends, relatives, and neighbors to care for the children, or give care to the children themselves? Most important of all is obtaining data on how mother-organized care children would compare with similar children who attend a typical free day care facility organized with government sponsorship after one, two, and three years of exposure to each type of care.

2. *What qualifications are really needed for caretakers of children under three years old in a non-family setting?* Inherent in the current bill is the assumption that courses in child psychology and similar subjects are going to make better qualified day care persons. Unfortunately, academic instruction is often more influenced by theory than by experience.

For example, for years child care experts advocated the abandonment of old customs and recommended four-hour feeding schedules for infants. Finally, a basic evaluation study was done. It was found that weight gain was more satisfactory in breast fed babies when feeding was more frequently than every four hours. We now know this is due to the hormone stimulating effects of sucking. However, this mistaken advice helped to make a generation of mothers feel inadequate due to their faulty milk supply, when really the problem was largely due to mistaken "expert" advice.

In my years of writing and research in child care, I have assiduously sought to find child care suggestions that are actually based on carefully done evaluative studies rather than theories. Such items are hard to find. Academic training may not guarantee greater wisdom in handling infants and young children.

What is needed is extensive test programs in which infants and young children are cared for by different types of caretakers with different types of training. Data concerning their progress would be collected and analyzed so that this following basic question can be answered: To what degree is academic training, previous successful personal mothering experience, and/or a nutriant personality of the institutional caretakers related to the degree to which children thrive in their care?

3. What effect does the removal of the young child from the family setting have on the parent-child relationship? Experimental studies suggest that separation of mother from infant during the first crucial days after birth may have long-reaching effects on maternal behavior, with the briefly separated mothers showing less interest in their babies. As yet virtually unexplored is the effect of separation on maternal interest in the case of an infant six months old, one year old, or two years old. How much separation, if any, at each age seems to be crucial? Sixty hours a week? Twenty hours a week? Again, little is known.

4. What other alternative types of meeting the problem of overburdened mothers are available and how do they work out for mother and infant alike?

Other governmental approaches to be carefully tested with evaluation research might include:

a. Free, nutritious food given to the expectant mother and families with young children, along with dietary instruction. Nutritional experiments that involve a total nutritional approach have indicated healthier, easier to care for babies, and healthier mothers--a situation which makes child care *much* easier. More recent studies done in the United States are needed. Some information may be obtained from the current WIC program, but more specifically designed programs are needed for full evaluation.

b. Organization of mother-to-mother groups in the community health care setting so that the mothers of babies and young children get to know each other and are encouraged to help each other withemotional support and mutu al help with the children. Mother-to-mother groups have spread widely in recent years, but their effectiveness in helping mother and children has not been sufficiently tested.

c. A pilot project in government civil service permitting two mothers or a mother and a father to share one job, each working half-time and each caring for the combined children the other half. Effect on the children and work performance of the participants could be studied.

In short, the problem is real, action is needed, but the steps to be taken should be in the direction of major funding of well-controlled studies of alternative methods of care of children under three and their consequences before nationwide steps are taken.

Social modifications, like drugs, can be potent and deserve equally carefully testing before being released for nationwide use.

Communications

GLENN E. WATTS, *President*

CWA

Workers of America

(AFFILIATED WITH AFL-CIO)
1925 K STREET, N.W.
WASHINGTON, D. C. 20006
TELEPHONE: AC 202 785-6700

July 11, 1975

File: 1.5

The Honorable Carl D. Perkins, Chairman
Committee on Education and Labor
U. S. House of Representatives
Washington, D. C. 20515

My dear Chairman Perkins:

The 37th Annual Convention of the Communications Workers of America passed a resolution of interest to you and your Committee.

For your information, I am enclosing a copy of the resolution entitled Child Care Programs with the floor debate.

Adoption of this resolution makes it an integral part of the CWA legislative program.

Sincerely yours,

Glenn E. Watts

Glenn E. Watts
President

Enclosure

DELEGATE IRVA V. SMITH (Local 4012): Mr. Chairman and Fellow Delegates:

CHILD CARE PROGRAMS

Twelve million children live in households headed by females; the median income is $6,195 if the mother works, $3,760 if she is not employed. Five million of those children live in families in which the only parent living at home is in the labor force.

In the United States, 26 million children have working mothers; 6 million of those children are under 6 years of age.

Those statistics show there is a need for programs to care for millions of children. Many mothers who want to enter the work force are prevented from doing so by lack of adequate child care.

Working parents, regardless of economic circumstances, all face the same problem. Only a small percentage are able to get good licensed child care which meets Federal standards. The rest are forced to face the never-ending nightmare of making arrangements with a changing group of sitters or with relatives, or leaving their children in custodial parking lots, or even worse, alone, in "self-care".

By any measurement, the nation lacks a comprehensive system of quality child care services to meet these needs. Some local efforts in the child care field have been undertaken over the years with some success. Thousands of children have received beneficial, high-quality services from programs developed by labor unions, parent cooperatives, and local community organizations and church groups. Such programs fill an important need in the communities they serve. These programs, like the excellent centers operated by a number of AFL-CIO affiliates, should be encouraged and continued.

But these scattered efforts are clearly far from enough. The only real answer is a massive Federal commitment to the provision of early childhood development and day care in communities throughout the country for all children who need these services.

Prime sponsors must be responsible elected officials. We believe, that there is great merit in giving the public school systems this prime sponsorship role.

In most communities, the school system would be the appropriate prime sponsor of the child care and early childhood development program, with the responsibility for planning programs, distributing funds and monitoring programs. Where the school system is unwilling or unable to undertake this responsibility in accordance with Federal standards, some other appropriate public or non-profit community organization should be eligible.

Even where the public school systems are the prime sponsors, all of the services need not actually be offered in public school facilities. For example, communities may want in-home child care, family and group day care homes for children who are too young or not ready for large school facilities as well as special services for the emotionally and physically handicapped which may be offered outside the education system.

Only public and non-profit groups should be permitted to participate in the program. There is no legitimate role for profit-making in child care programs. Profit-makers were excluded from providing day care under Head Start. They should continue to be excluded in any new early childhood and day care programs.

BE IT RESOLVED: That this 37th Annual Convention of the Communications Workers of America call on the Congress to enact and provide funds for early childhood and child care programs, on a coordinated basis so as to include health, nutrition, and necessary support services, day care, education, effective parent involvement, and to have the programs operated on a non-profit basis.

Mr. Chairman, the Resolutions Committee moves the adoption of Resolution 37A-75-15, Child Care Programs (Applause)

PRESIDENT WATTS: You have heard the motion to adopt Resolution 15.

. . . The motion was duly seconded . . .

PRESIDENT WATTS: A second has been heard from the floor. On the motion, at microphone No. 3, the Chair recognizes Delegate Ridinger, Local 12143.

DELEGATE EARLINE RIDINGER (Local 12143): Thank you, Mr. Chairman.

Mr. Chairman, Brothers and Sisters: I rise to speak in favor of the resolution on Child Care. For it is a fact that until the system and the minds of the people change, the majority of the females will remain in low-paying jobs.

Working mothers need child care centers because having children is a condition of sex but should not prohibit mothers from gaining employment. This would be another step forward in eliminating discrimination toward females.

I urge you to support this resolution. Thank you. (Applause)

PRESIDENT WATTS: On the motion, the Chair recognizes at microphone No. 3, Delegate Daniels, Local 11509.

DELEGATE BARBRA DANIELS (Local 11509): Mr. Chairman, Fellow Delegates: I rise to support this resolution, for a number of reasons. One: "Call on the Congress to enact and provide funds for early childhood and child care programs, on a coordinated basis so as to include health, nutrition, and necessary support services, day care, education, effective parent involvement, and to have programs operated on a non-profit basis." These words bring tears of joy to my eyes. To have a union like CWA recognize America's biggest disgrace makes me proud to be a member of CWA.

For years, parents of children in children's centers have been asking for these things, but each time they ask, they are not heard. Child care is a must for the working American. However, some working Americans do not have any kind of child care.

According to "Ms. Magazine," May, 1973 issue, it is estimated there are at least a million and a half of latch-key children, or self-care, whichever you prefer to call them. No one takes care of them; they take care of themselves. These kids often show up later as statistics in juvenile delinquency cases and/or drug addiction centers. Then we pay high for their care.

My final reason is, being a member and an officer of Child Care Associations from the city level to the national level, I have seen many, many, good bills written for child care programs. They seem to get so far, and die. Hopefully, this resolution will get Congress motivated to help cure America's biggest disgrace. I urge your support. Thank you. (Applause)

PRESIDENT WATTS: At microphone NO. 3, the Chair recognizes Delegate James of Local 11513.

DELEGATE RENEE JAMES (Local 11513): Mr. Chairman, Fellow Delegates; Mothers, Fathers, Prospects: I rise to support the resolution for child care programs. This resolution is too long overdue. Your children are our future union leaders. I cannot believe that as Union people, you could openly or consciously vote against this resolution. It must be passed. If you do not pass it, you explain it to the children. (Applause)

PRESIDENT WATTS: At microphone No. 3, the Chair recognizes Delegate Wells, Local 3105.

DELEGATE W. J. WELLS (Local 3105): Mr. President, Fellow Delegates: Many of you ladies here today and some of you men have been caused to be single again, and many of our members back home are caused to face this growing problem in our nation. All of us must work for a living in order to attain a decent living standard, and many are faced with the problem of good and proper care for their children.

In most locations, nurseries and baby-sitters cut deeply into their hard-earned after-taxes moneys. Back home, several futile efforts have been made among the Traffic people to organize and maintain baby-sitting cooperatives, especially due to the many and weird split-tricks that they are scheduled to work. Many of these good people cannot even afford personal transportation and have to participate in car pools and other means of getting to work.

Today many people are on welfare because they cannot afford baby-sitters or nurseries in order to obtain work. This problem is especially prevalent among the minorities.

This resolution as stated is a good resolution, deserves your serious consideration, and could be the solution to this growing problem. I urge you delegates here to accept and approve this resolution. Thank you. (Applause)

PRESIDENT WATTS: At microphone No. 3, the Chair recognizes Delegate Darville of Local 3121.

DELEGATE SHIRLEY DARVILLE (Local 3121): Mr. Chairman Fellow Delegates: As a working mother and retired nurse, I rise to support this resolution.

Many children of working mothers are left with improper care and no supervision. I speak from personal experience, having been head nurse in charge of emergency room care. I have treated many children who have been hurt, and, yes, 7- and 8-year-old children who have been molested. Had there been proper child care centers, many of these cases could have been avoided.

I strongly urge you to support this resolution. (Applause)

PRESIDENT WATTS. At microphone No. 1, the Chair recognizes Delegate Banks of Local 9408.

DELEGATE LLOYD R. BANKS (Local 9408): I move the previous question. (Applause)

PRESIDENT WATTS: You have heard the motion. You understand the parliamentary situation: A two thirds vote is required. It is not debatable.

The Chair will put the question to close debate. Will all those in favor of the motion to close debate, signify by raising their right hand; down hands. Opposed, by a like sign; down hands. The motion is carried.

The question is now on the adoption of the resolution. But the Chair would like to have you indulge him for one moment to recall for you that, as you act on this resolution, you should keep in mind that during World War II, our country at the federal level provided ample funds for day-care centers since mothers and women were needed in the work force for a great effort. The effort that is needed today is no less. We have done it once and we can do it again.

It was a great tragedy when, after World War II, that need dropped from our minds. But I think we, by this action today which I am anticipating, will indeed step forward to be one of the leaders in this country to accomplish a most worthwhile objective.

Will all those in favor of the motion to adopt, signify by raising their right hand; down hands. Opposed, by a like sign; down hands. The motion to adopt is carried. (Applause)

I am going to interrupt the reporting of the Resolutions Committee to recognize at microphone No. 2, the Privilege mike, Delegate Archuleta of Local 9490.

DELEGATE DANIEL A. ARCHULETA (Local 9490): Thank you, Glenn. Brothers and Sisters: I come to the Privilege microphone to appeal the decision of the parliamentarian in regards to a motion I wish to put forth for your consideration. I was denied the right to present the resolution.

My resolution was sent to CWA headquarters on March 25 of this year for consideration, but was set aside by the Resolutions Committee via a letter delivered to me here at the convention. This naturally left me very little time, because of the complexity of the resolution, to seek some rebuttals to some of the arguments they put forth in their behalf.

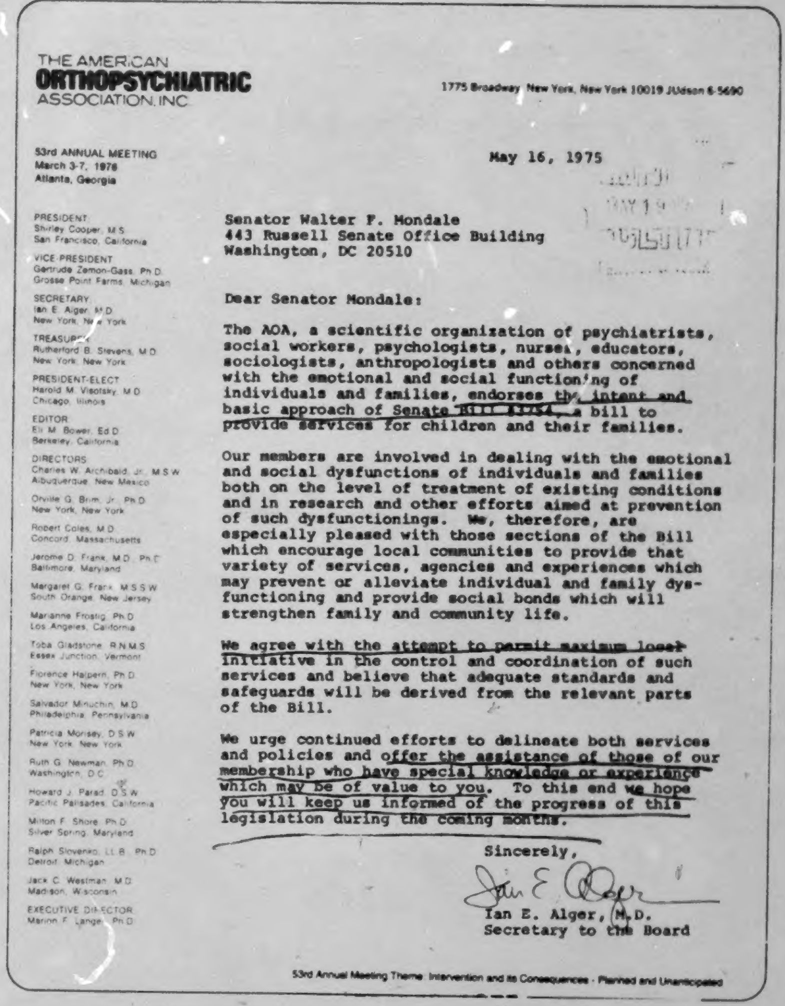
I appeared before the Committee, heard their arguments for the denial of my resolution. I checked further with the Jacques Cousteau Society, in whose behalf this resolution is presented, in Connecticut on two occasions by phone. In one of these phone conversations, I was on for almost one hour this morning, and that was at 6:00 A.M. our time.

I am convinced at this time, after talking with Frederick Heiman who is the President of the Cousteau Society, that this resolution should go forth at this time and place, and I would ask you to consider that and give me that right.

Thank you. (Applause)

PRESIDENT WATTS: The delegate has challenged a preliminary ruling made by the parliamentarians, and it relates to the procedures that we use in order to have an efficient operation for the convention.

The delegate very wisely, well before the convention was in session, sent in an idea for a resolution. The concept was considered by the Resolutions Committee, and in their own judgment they decided not to report that resolution out. Following their usual practice, they advised the individual submitting the suggested resolution of their action, which obviously then permits action by convention to permit such a resolution to be called out even though it's not reported out by the



THE AMERICAN
ORTHOPSYCHIATRIC
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53rd ANNUAL MEETING
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May 16, 1975

Senator Walter F. Mondale
443 Russell Senate Office Building
Washington, DC 20510

Dear Senator Mondale:

The AOA, a scientific organization of psychiatrists, social workers, psychologists, nurses, educators, sociologists, anthropologists and others concerned with the emotional and social functioning of individuals and families, endorses the intent and basic approach of Senate Bill [illegible], a bill to provide services for children and their families.

Our members are involved in dealing with the emotional and social dysfunctions of individuals and families both on the level of treatment of existing conditions and in research and other efforts aimed at prevention of such dysfunctionings. We, therefore, are especially pleased with those sections of the Bill which encourage local communities to provide that variety of services, agencies and experiences which may prevent or alleviate individual and family dysfunctioning and provide social bonds which will strengthen family and community life.

We agree with the attempt to permit maximum local initiative in the control and coordination of such services and believe that adequate standards and safeguards will be derived from the relevant parts of the Bill.

We urge continued efforts to delineate both services and policies and offer the assistance of those of our membership who have special knowledge or experience which may be of value to you. To this end we hope you will keep us informed of the progress of this legislation during the coming months.

Sincerely,

Ian E. Alger

Ian E. Alger, M.D.
Secretary to the Board

53rd Annual Meeting Theme: Intervention and its Consequences - Planned and Unanticipated

STATEMENT OF THE
AMERICAN ASSOCIATION OF MARRIAGE AND FAMILY COUNSELORS
TO THE
SENATE SUBCOMMITTEE ON CHILDREN AND YOUTH
AND THE HOUSE SUBCOMMITTEE ON EDUCATION

Presented by: Frederick G. Humphrey, Ed.D.,
President-Elect
American Association of Marriage
and Family Counselors

and

Steven L. Engelberg, Esq.,
American Association of Marriage
and Family Counselors' Counsel
for Governmental Affairs

June 20, 1975

Chairman Mondale and Chairman Brademas:

My name is Frederick G. Humphrey, and I am President-Elect of the American Association of Marriage and Family Counselors. On behalf of AAMFC, I am presenting this statement in support of S.626 and H.R.2966, the Child and Family Services Acts, of 1975.

AAMFC is made up of over 3,000 individuals who are professional counselors working to assist American families in coping with the wide range of problems which result in family breakdowns.

AAMFC was founded in 1942 by a small group of professionals along the East Coast, who recognized that something positive could be done to strengthen American marriages and the family unit. This organization has now spread throughout most of our 50 states and into neighboring Canada. Our members are located in both major urban areas and in small rural communities.

The average marriage and family counselor assists couples preparing for marriage, couples coping with the "normal" struggles of marriage and family life, and, in a growing number of situations, our members help individuals through the trauma and reorganization that takes place when divorce occurs.

Our organization is made up entirely of well-trained professionals who must meet demanding standards of training and preparation for their work. To join the AAMFC, an individual must have obtained a minimum of a graduate Master's degree in a behavioral science (a significant number of our members have their doctorates as well), and must have been engaged in the practice of marriage and/or family counseling for a minimum of 2,000 hours. During this time, these individuals must receive a minimum of 200 hours of supervision of their practice. This supervision must be furnished by highly skilled and experienced practitioners, who meet our demanding standards.

Many AAMFC members, like myself, are also engaged in educational programs in our nation's colleges and universities, where we teach courses in marriage, family life, parenthood, human sexuality, child development, and related areas. We also train graduate students in the special skills and knowledge necessary to become a marriage and family counselor.

AAMFC also devoted a major segment of its attention to cooperating with other professional groups concerned with child and family life. We exchange information and cooperate on programs of mutual concern. We have worked long and hard to establish and revise state laws to protect the public from unqualified and unscrupulous individuals who prey on family problems by masquerading as "counselors". We have held cooperative conferences with the American Academy of Family Physicians, the American College of Obstetricians and

Gynecologists, the National Council on Family Relations, the American Bar Association, the American Psychological Association, and similar groups.

I am submitting four AAMFC brochures with this statement, The brochure marked "Exhibit A" explains the nature of our organization; the second, marked "Exhibit B", describes our membership standards; the third, "Exhibit C", describes our standards for training centers in marriage and family counseling; and the fourth, "Exhibit D", describes our standards for accreditation of graduate programs in marriage and family counseling.

On behalf of AAMFC, I wish to applaud and support your efforts, and those of your colleagues, in working for passage of S.626, the Child and Family Services Act of 1975. For too long, Americans have given only lip service to the needs of our youngest citizens - our children. What our nation has failed to realize is that investing in the health and development of our children is an investment in our country's future. Failure to help the children that S.626 is concerned with may very well result in these children becoming partial or total wards of our various governmental bodies throughout much of their lifetimes.

Based on my own professional experience, I know how vital it is that S.626 be enacted into law. I am a member of the faculty of the Department of Child Development and Family Relations, School of Family Studies, University of Connecticut.

For the past twenty-five years, I have been professionally engaged in psychiatric social work with children and adults, in marriage and family counseling, in family life education, and in university teaching, where my work involves preparing young adults to prepare for careers in child and family services. My clinical work has largely been devoted to helping individuals with their troubled lives but, at the same time, I have been active in the preventive mental health and educational fields. My experience has made me keenly aware of the waste in human resources and energies that result when family problems are not tended to when they are minor in nature. Having thoroughly reviewed S.626, I believe it will strike at the heart of my concerns by strengthening the lives of children and family members before a major crisis arises.

Most of the members of AAMFC have professional skills and background similar to my own. At our professional meetings, in our Journal, and in our less formal contacts, we are constantly addressing ourselves to the task of seeking better ways of strengthening American family life. It is very upsetting for us to see the Federal Government spend billions of tax dollars to purchase armaments and maintain large military forces, while only a relatively tiny sum is allocated to support family life in this country.

While the primary concern of our Association remains as it always has been in supporting and aiding intact families, we also recognize that failure to aid families in the process of a divorce is to desert them at the time of their greatest need. The single parent family is now a common occurrence, and AAMFC members would welcome the services that S.626 makes available to these children and adults.

In working to help people prepare for marriage through premarital counseling and family life education, our members strive to perform the preventive role inherent in your legislation. We all recognize that one of the most serious and most demanding task that faces any American adult is that of being a parent. Many adults are unprepared for this task. Counselors attempt to help these adults straighten out their marital and parental conflicts, but day care facilities, parent education, and health services are vitally needed to assist in this effort. What is rarely said is that "marital health" is a fundamental requirement in providing "family health", and this, in turn is a vital and necessary component of providing adequate child care and health.

Every citizen obtains his or her start in life in their family unit. When the family is unable, for any reason whatsoever, to provide a growing child with adequate care, nutrition, shelter, and most importantly with a positive sense of self, then the child becomes handicapped for the rest of his or her life. In spite of the best efforts of clinicians like ourselves, millions of American children are growing up with these handicaps. From 1947 through 1972, 12,122,000 American families were broken by divorce. Inasmuch as the majority of divorces involve families with young children, it may be safely said that an even larger number of children have experienced the trauma of a broken family. Still more millions of children are growing up in homes broken by death or desertion. Added to these figures are countless other children growing up in families that are technically intact, but where marital strife, child abuse, and neglect are preventing the children from obtaining the type of foundation that will enable them to grow up adequately prepared for adult life.

Even when families stay intact and are in general good health, millions are coping with low incomes that force mothers out of their homes and into the labor market. Proper child care facilities, such as day care centers, are rarely available to these children. All too often, we see many of these disadvantages grouped together: families broken by strife or divorce, inadequate incomes for the principal wage earner - especially if that person is a woman - and the primary victims of these circumstances are the innocent children.

Marriage and family counselors can realistically hope to serve only a small fraction of these family needs.

In my own Department of Child Development and Family Relations I have served for some years as chairman of our faculty Graduate Admissions Committee. Graduates of our Department are currently serving as marriage and family counselors, family life and parent educators, day care administrators and consultants, and child and family service administrators. I regret to say, however, that we frequently have been unable to offer graduate training to able and deserving young people who want to prepare themselves for careers in these fields - but who lack the financial resources to pay for these studies. I am gratified to note that S.626 contains provisions, under Title IV, Section 401, for the training of personnel needed to administer this Act.

My own Department at the University of Connecticut might qualify under this Section to provide professional training, and other members of AAMFC hold similar posts in community colleges and child and family service organizations, where they can be involved in training the non-professionals required. Our members in university settings would also be qualified to make vital contributions in the evaluation and research provisions so wisely called for in this legislation.

Many Americans became very disheartened with government affairs during the recent Watergate hearings and their related developments. The activities of the former President, including his veto of the 1971 Child Development Bill, and his Administration's apparent lack of concern and understanding for family life in this country, left many of us feeling that we were waging a lonely, unfruitful struggle to improve the qualify of family life in America. I trust that family life and its related concerns will receive more understanding and support in the future, and S.626 is a vital step in that direction.

On behalf of AAMPC, I would like to thank this Committee for allowing us to present our views on this critically important issue.

Exhibit A

THE AMERICAN ASSOCIATION OF MARRIAGE AND FAMILY COUNSELORS

what it is...
what it does

The American Association of Marriage and Family Counselors is an organization dedicated to professional marriage counseling and to the field of marriage and family relations. Nearly 3000 members throughout the United States and Canada include psychologists, psychiatrists, social workers, ministers, physicians, sociologists, attorneys and educators — all of whom are highly-trained professional marriage counselors working to help couples solve their marriage and family problems. Founded in 1942, AAMFC has national headquarters in Claremont, California, and regional divisions throughout the continent.

AAMFC performs many functions important to its members, to the profession of marriage counseling, and to the public. These include:

1. *Professional standards* — AAMFC sets rigorous membership standards covering specialized academic training and professional experience. These standards not only help elevate the entire profession of marriage counseling but discourage unqualified practitioners and insure that skilled, effective counseling will be available to couples who need it. AAMFC also has a code of professional ethics to which each member subscribes. AAMFC's goal is to insure that every person who practices marriage counseling will meet its professional standards and observe its code of ethics.

2. *Specialized training* — AAMFC examines, approves and encourages training centers in marriage counseling. These centers, located in major universities and educational institutions, offer advanced training programs and marriage counseling internships to meet the growing demand for qualified counseling.

3. *Professional meetings* — AAMFC and its regional divisions conduct frequent regional, national and international conferences to provide members with new ideas, techniques and developments in the field of marriage and family counseling.

4. *Cooperation with other professions* — AAMFC maintains vital contact with professional groups in allied fields for exchange of information and cooperation on programs of mutual benefit. AAMFC is working closely with other professional groups to establish and revise state laws pertaining to marriage, divorce, licensing of marriage counselors and related subjects. AAMFC has held cooperative conferences with the American Academy of Family Physicians, American Association of Obstetricians and Gynecologists, the National Council on Family Relations, the American Bar Association, the American Psychological Association and many other organizations.

5. *Public education* — AAMFC carries on intensive educational programs to help people understand more about marriage and family problems, about the role of professional counseling in preventing and solving these problems, and about the dangers of unscrupulous or unqualified persons who pose as marriage counselors. Public education also helps couples learn to solve their own marriage difficulties and build sounder, happier family relationships. AAMFC staff and members provide factual material on marriage and family problems to newspapers, television, radio and magazines. Members speak to many lay groups and write extensively for periodicals and professional journals.

In a broader sense, the American Association of Marriage and Family Counselors is concerned not just with the profession of marriage and family counseling but also with *people* and the needs and problems they face in relation to marriage — whether they are now married, will be married, have been married or may somehow be affected by marriage in our society. AAMFC is also concerned with the institution of marriage itself — its strengths and weaknesses, its changing patterns, its role in the lives of all people. AAMFC firmly believes that this most important and intimate of human relationships demands increased understanding, research and education at all levels, and that the profession of marriage and family counseling must take the lead to insure these needs are met.

For the public, AAMFC provides a nationwide referral service by supplying the names of qualified marriage counselors and general guidelines for seeking their help.

For interested professionals, AAMFC furnishes consultation about membership standards, application procedures, training, conferences, seminars and related programs.

For any information, contact AAMFC national headquarters.

American Association of
Marriage and Family Counselors
225 Yale Avenue
Claremont, California 91711
714: 621-4749

C. Ray Fowler Ph.D.
Executive Director

Exhibit B

THE AMERICAN ASSOCIATION OF MARRIAGE AND FAMILY COUNSELORS

MEMBERSHIP STANDARDS

. . . Definition

. . . Qualifications

. . . Guidelines

CLINICAL MEMBER

1) Recognized graduate professional education with the minimum of an earned master's degree from an accredited educational institution in an appropriate behavioral science field, mental health discipline, or recognized helping profession.

2) (a) 200 hours of approved supervision of the practice of marriage and family counseling, ordinarily to be completed in a 2-3 year period, of which at least 100 hours must be in *individual* supervision. This supervision will occur preferably with more than one supervisor, and should include a continuous process of supervision with at least several cases.

(b) 1000 hours of clinical experience in the practice of marriage and family counseling under approved supervision, involving at least 50 different cases.

OR

(c) 150 hours of approved supervision of the practice of psychotherapy, ordinarily to be completed in a 2-3 year period, of which at least 50 hours must be *individual* supervision. *Plus:* At least 50 hours of approved *individual* supervision of the practice of marriage and family counseling, ordinarily to be completed within a period of not less than one nor more than two years.

(d) 750 hours of clinical experience in the practice of psychotherapy under approved supervision involving at least 30 cases. *Plus:* At least 250 hours of clinical practice of marriage and family counseling under approved supervision, involving at least 20 cases.

3) Applicants may be requested to have a screening interview with the national Membership Committee or a regional membership committee, or designated representative(s).

4) Demonstrated readiness for the independent practice of marriage and family counseling.

5) Upon completion of the graduate professional degree plus the required supervised clinical experience, the candidate will be expected to have mastered the important theory in the field of marriage and family counseling as defined in the document on supervision: "The Approved Supervisor is responsible for the supervisee's familiarity with the important and relevant literature in developmental psychology, personality theory, human sexuality, behavior pathology, marriage and family studies and marriage and family therapy."

FELLOW. A minimum of five years in good standing as a Member of the Association and significant contributions to the field of marriage and family counseling, as determined by the Board of Directors upon recommendation by the Honors Committee.

DIPLOMATE. A Member who demonstrates an advanced level of clinical competence and experience, as determined by the Board of Directors.

STUDENT. The designation "Student" may be given to a person who is currently enrolled in the graduate program of an accredited college or university in an appropriate discipline, or one who has completed such a program and is now serving on an internship basis in a training program approved by the Association or is under supervision by arrangement with the Membership Committee. The Student category shall ordinarily be for a maximum of five (5) years, or until satisfactory completion of requirements for *Member*, whichever shall come first.

ASSOCIATE. The designation "Associate" may be given to a person who has already completed graduate studies and achieved professional competence in an appropriate behavioral science or mental health field and who is now receiving supervision by arrangement with the Membership Committee in order to become qualified as a *Member*. The Associate category shall ordinarily be for a maximum of five (5) years or until satisfactory completion of requirements for Member, whichever shall come first.

AFFILIATE. Upon recommendation of the Honors Committee the Board of Directors may, at its discretion, invite suitable persons to become Affiliates of the Association. Such persons shall be of high standing in a field related to marriage and family counseling, and shall be making an outstanding contribution to the field of marriage, the family, or counseling. The total number of Affiliates shall not exceed two percent (2%) of the total number of clinical members. All Affiliates shall be subject every five (5) years to re-election by the Board of Directors.

HONORARY LIFE MEMBERSHIP. Upon recommendation of the Honors Committee the Board of Directors may, at its discretion, invite suitable persons to become Honorary Life Members of the Association. Such persons shall be of high standing in a field related to marriage and family counseling, and shall have made an outstanding contribution to the field of marriage, the family, or counseling. The total number of Honorary Life Members shall not exceed 25.

• • • •

Members, Fellows and Diplomates shall be required to meet the following standards:

ACADEMIC AND PROFESSIONAL STANDING. The applicant shall be required to hold whatever graduate or professional degree is necessary for the practice of the recognized behavioral science or mental health profession for which he or she has been trained. The Board of Directors shall determine, for the guidance of the Membership Committee, and in consultation with authorities in the professional fields concerned, how this requirement is to be interpreted.

CLINICAL COMPETENCE AND EXPERIENCE. The applicant shall have had at least three (3) years of experience in marriage and family counseling, at least one (1) year of which has been under supervision deemed acceptable by the Membership Committee. This must be in addition to any general training he or she may have received in counseling or psychotherapy. This internship shall have been in a training program approved by the Association or other internship deemed acceptable by the Membership Committee. The applicant may be required to submit case material for evaluation, and to undergo an oral examination, in order to establish clinical competence. (This section from the AAMFC Bylaws, adopted 1/74, is a broad general statement of the fundamental requirements. It has been amplified and modified by subsequent actions of the Board of Directors. The specifications for clinical training and supervision which are to be found elsewhere in this brochure are recognized by the Membership Committee as the current basis for membership.)

PERSONAL MATURITY AND INTEGRITY. The applicant shall possess the qualities of character and of personality deemed to be necessary for the task of marriage and family counseling. The Membership Committee shall carry out whatever investigation may be necessary to secure satisfactory evidence of this.

LICENSING. In those states which license marriage and family counselors, an applicant who holds such a license will ordinarily be deemed qualified for membership. Exception to this will be where state licensing standards do not meet minimum national AAMFC clinical standards. In states which license marriage and family counselors, members of the Association will ordinarily be required to meet the standards for licensing in that state.

CONTINUING PROFESSIONAL EDUCATION. Clinical members of the AAMFC are expected to document their participation annually in some significant continuing professional education experience, with a view to increasing self-awareness and updating professional skills.

. . .

DUES STRUCTURE (Annual)	Clinical Member	$65
	Associate	$35
	Student	$15

1975

Exhibit C

THE AMERICAN ASSOCIATION OF MARRIAGE AND FAMILY COUNSELORS

STANDARDS FOR TRAINING CENTERS IN MARRIAGE AND FAMILY COUNSELING

TRAINING CENTERS IN MARRIAGE AND FAMILY COUNSELING

A. ORGANIZATION AND STRUCTURE

There must be some established group (such as a marriage and family clinic, a social agency, a counseling center or a group practice) recognized as reputable and responsible, which operates the counseling service with a clear administration and accepts broad responsibility for the service.

Provision needs to be made for:

1) A Clinical Director (or Director of Training) who is administratively responsible for the clinical training facilities and programs.
2) Employment of competent, paid, professional staff who meet minimum professional standards for the practice of marriage counseling and clinical *supervision.*
3) Establishment and supervision of a well-defined financial policy and a budget reasonably guaranteed for three years or more.
4) Development of accepted personnel practices.
5) Support and interpretation of the program to the community.

If the training center is part of a larger institution, then appropriate fiscal, administrative and organizational responsibilities must be assumed by the institution and in a way that is clearly understood.

B. PROFESSIONAL RESOURCES

The staff of the training center should consist of:

1) A professional staff, at least some of whom must be members of the AAMFC.
2) Supervisors who have training, experience and demonstrated ability in teaching and supervising trainees or staff in the practice of marriage counseling, with a substantial focus on interpersonal relations. It is expected that identified supervisors among staff members will be able to meet the requirements of the American

Association of Marriage and Family Counselors for designation as an Approved Supervisor.

3) Experienced personnel from the fields of psychiatry, psychology and social casework (if not included on regular staff) should be available to staff as needed, and their participation regularized.

C. OPERATIONAL PROCEDURES

1) *Case Files and Record Keeping*

Systematic, confidential record-keeping is essential for teaching marriage and family counseling and for evaluating the service. This should include data with regard to:

a) Intake process
b) Identifying biographical information
c) Source of referral
d) Problems presented
e) Records of all examinations and tests
f) Staffing and assignments
g) Consultations and case conferences
h) Significant detail on the course of the counseling process (including referral or termination)
i) Fees paid
j) Summary of case at the time of closure

2) *Confidentiality*

Confidentiality of all clinical records is imperative and must be specifically provided for. This extends to teaching, training and educational assignments. (Confidentiality is ultimately the responsibility of the Clinical Director or Director of Training.)

3) *Fees*

The policy concerning the setting and collecting of fees should be clearly stated.

4) *Number and Variety of Cases*

The training center should be able to provide for the trainee a reasonable number and variety of cases, such as pre-marriage counseling, marriage counseling, divorce and remarital counseling, family therapy, and group couples' counseling.

D. TRAINING PROGRAM

1) *Usual Entrance Requirements for Trainees*

a) *Academic requirements.* The trainee should be enrolled in (or have completed) a doctoral or a master's degree program in social work, sociology, or a closely related field — medicine, law, or the ministry.

b) *Personal qualifications.* Consistent provision must be made by the staff of an Approved Training Center for the careful exploration of the personal qualifications of each applicant who fulfills the professional requirements for training (by direct interview, unless distance prevents).

c) *Plans for professional utilization of training.* A candidate should submit a reasonably realistic plan for subsequent professional use of his counseling training.

2) *Substantive Content*

It is expected that the program will expose the student to the important areas of theoretical competency. This would include personality theory, human sexuality, marriage and family studies, marriage counseling and family therapy.

3) *Structures of Supervision*

In this context the concept of "supervision" is assumed to have the following characteristics:

a) It is *face-to-face* conversations with the Supervisor.

b) It is sustained and intense, usually once a week over a period of one to two years.

c) It focuses on the raw data from the supervisee's current clinical work, this made directly available to the Supervisor through such means as direct observations, written clinical notes and audio and television recordings.

d) It is a process clearly distinguishable from personal psychotherapy and is contracted to serve *professional* goals.

It is expected that a trainee in an Approved Training Program will practice during the training year a minimum total of *500* hours of counseling and will have received not less than *200* hours of supervision to include at least *50* hours of individual supervision.

It is further expected that group supervision (or else some other part of the curriculum) will provide for a regularized interprofessional-interdisciplinary case conference. Supervision should include instruction and practice in the uses of psychiatric consultation, as well as the giving and receiving of referrals.

4) *Evaluation*

Evaluation is an ongoing process. It is the responsibility of the designated supervisor in consultation with the Clinical Director or Director of Training to systematically evaluate the progress and performance of each trainee and give appropriate feedback. A final evaluation is part of the process of termination of training.

Adopted by the Board of Directors
10/9/71

For further information
contact AAMFC national headquarters.

American Association of
Marriage and Family Counselors
225 Yale Avenue
Claremont, California 91711

714:621-4749

C. Ray Fowler, Ph.D.
Executive Director

1-1-75

Exhibit D

THE AMERICAN ASSOCIATION OF MARRIAGE AND FAMILY COUNSELORS

STANDARDS FOR ACCREDITATION OF GRADUATE PROGRAMS IN MARRIAGE AND FAMILY COUNSELING

STANDARDS FOR ACCREDITATION OF GRADUATE PROGRAMS IN MARRIAGE AND FAMILY COUNSELING

These standards are intended to apply to graduate programs in marriage and family counseling conducted in connection with masters or doctoral programs in colleges and universities accredited by the appropriate regional accrediting associations. They are not intended to apply to post-degree training centers, specialized programs in professional schools, or programs conducted in non-academic settings.

A. *Organization and Structure of Clinical Program and Services*

Appropriate administrative, organizational, and fiscal responsibilities to insure the stability, continuity, and integrity of a sound training program and good clinical services must be assumed by the institution. This means in part that while broad responsibility for the training program and clinical services is assumed by the institution, the freedom and responsibility to conduct the program and offer the services are entrusted to appropriate clinically qualified persons who meet the minimum professional standards for the practice and supervision of marriage and family counseling.

Specific provision needs to be made for:

1. A distinct clinical-professional structure for training and service, separate from academic, non-clinical structures, although functioning in cooperative, complementary ways.
2. Administrative Direction: There will be a Program Director who is administratively responsible for:
    a. the clinical training facilities and services, and.
    b. the implementation and oversight of the training program.

At the discretion of the local setting, these varied administrative responsibilities may be shared, but in clearly defined ways, between a Clinical

Director and a Training Director. Such individual(s) must meet the minimum professional standards for the clinical practice and supervision of marriage and family counseling.

3. Competent professional staff who also meet the minimum professional standards for the clinical practice and supervision of marriage and family counseling.
4. Adequate facilities for providing clinical services and training.
5. A well-defined financial policy and a budget reasonably guaranteed for three years or longer.
6. Accepted personnel practices for teaching, clinical service, and administrative personnel.
7. Interpretation of the services to the community.

B. *Professional Staff and Resources*

The professional staff and resources of the training program should consist of:

1. Professionally qualified marriage and family counselors, at least part of whom are members of the AAMFC.
2. Supervisors who have training, experience, and demonstrated ability in teaching and supervising trainees or staff in the practice of marriage and family counseling, at least part of whom are able to meet the requirements for designation as Approved Supervisors with the AAMFC.
3. Experienced personnel from appropriate behavioral science and clinical fields who are available to the staff and trainees as needed for didactic, supervisory, or consultative purposes.

C. *Operational Resources*

1. *Cases.* The training program and clinical settings should be able to provide for the trainee a reasonable number and variety of cases, such as premarriage counseling, family therapy, and group couples counseling.
2. *Records.* Systematic, confidential record-keeping of the type that is essential for teaching marriage and family counseling and for evaluating the services provided should be maintained. This includes data pertaining to the intake process; appropriate biographical information on clients; source of referral; problem(s) presented; records of all examinations and tests, staffings and assignments, consultations, and case conferences; and significant description of the course of the counseling process, including events, client progress, fees paid, termination or referral, and a summary of the case at the time of closure.
3. *Confidentiality.* The maintenance of confidentiality for all clinical records and interviews is imperative and must be specifically provided for by the Clinical Director and Training Director.
4. *Fees.* The policy concerning the establishment and collection of fees should be clearly stated.

D. *Academic and Clinical Program*

1. *Entrance Requirements*
   a. *Academic Qualifications.* The trainee should be enrolled in a doctoral or masters program in marriage and family, psychology, sociology, or a closely related field or, if enrolled as a special student, have completed such a degree at an appropriately accredited graduate school or an appropriate degree at an accredited professional school in medicine, law, social work, or theology.
   b. *Personal Qualifications.* Assessment of the personal qualifications and readiness for clinical training of applicants is the responsibility of clinically qualified and designated staff members who should make consistent provision for screening and admitting or rejecting applicants who otherwise fulfill the qualifications for such training.
   c. *Professional Utilization.* An applicant should present to the clinical

staff a reasonably realistic plan for subsequent professional use of his counseling training.

2. *Substantive Content.* The student will be exposed to the important areas of theoretical competency, including specifically: personality theory, psychopathology, human sexuality, marriage and family studies, marriage counseling, and family therapy. It is expected that such exposure will include both depth and breadth, rather than being narrowly focused, and that it will be flexible enough to allow for recognition of knowledge gained prior to entry into the training program and permit appropriate tailoring of academic coursework requirements and clinical experiences to meet the professional needs of individual trainees.
3. *Clinical Experience.* A trainee will obtain practice in doing marriage and family counseling work in a training year. The total hours of such clinical work, the ratio of supervisory hours to client-contact hours, and of individual supervision to group supervision, are to be appropriate to the type of program in which the trainee is enrolled. It is further expected that through group supervision or some other place in the training the program will provide for a regularized interprofessional-interdisciplinary case conference. The training and clinical experience should include instruction and practice in interprofessional cooperation and consultation, including the giving and receiving of referrals.
4. *Supervision.* It is assumed that supervision:
   a. Involves face-to-face conversations with the supervisor.
   b. Is sustained and intense, occurring usually once a week over a period of one or two years.
   c. Focuses on the raw data from the supervisee's current clinical work, which is made directly available to the supervisor through such means as written clinical materials, direct observations, and video and audio recordings.
   d. Is a process clearly distinguishable from personal psychotherapy and is intended to serve *professional* goals.
5. *Personal Psychotherapy.* Recognition of the role and value of personal psychotherapy and the encouragement of trainees to secure such assistance to their personal and professional development is recommended. Whenever possible the institution should provide opportunity for the trainee to secure such assistance.
6. *Evaluation.* Evaluation of the trainee's clinical competence and fitness for practice is the responsibility of the designated clinical supervisor(s) in consultation with the Training Director. The clinical performance and progress of the trainee should be systematically evaluated and appropriate feedback given during the course of training. Continuing or dropping a trainee from the clinical program or recommending a trainee for practice, licensure, or professional organization membership is the ultimate responsibility of the clinical staff and separate from academic work and degree requirements. A final evaluation is part of the process of completing the training.

Adopted by the Board of Directors
October 1974

DEPARTMENT OF EMPLOYMENT AND SOCIAL SERVICES
SOCIAL SERVICES ADMINISTRATION
STATE BOARD OF SOCIAL SERVICES
1315 ST. PAUL STREET
BALTIMORE, MARYLAND 21202
(301) 383-5580

STATE OF MARYLAND
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Governor
RICHARD A. BATTERTON
Secretary

MICHAEL R. DOBRIDGE, M.D.
Chairman
RICHARD W. BATEMAN, D.S.W.
Director

June 3, 1975

The Honorable Walter Mondale, Chairman
Subcommittee on Children and Youth
Senate Committee on Labor and Public Welfare
Suite 4230, Dirksen Office Building
Washington, D. C. 20510

Dear Senator Mondale:

As you renew your efforts to gain enactment of a comprehensive program of day care and services to children and their families, I wish to express my personal support and that of the Maryland State Board of Social Services, of which I am Chairman. We believe that the time for a major thrust in this area by the Federal Government is long overdue.

Our Board applauds the "whole child" and "whole family" approach of S. 626 (HR 2956). It is consistent with what we in Maryland, with limited funds, have attempted to achieve in our 29 State-operated day care centers, financed with Title IV A and State funds. We long ago rejected the concept of custodial arrangements as good enough for our children, yet we know that most children of working mothers are in such care arrangements -- if they are being cared for at all. We know also that studies have shown -- and our own observations have confirmed -- that youngsters who have been disadvantaged by poor economic and social circumstances are aided to overcome that disadvantage and to achieve their full potential, if given the stimulus and enrichment of a quality day care program. We want Maryland children to have that opportunity, but currently available resources are inadequate to meet the fast expanding need, so we pin our hopes on S. 626 and similar bills.

Despite the foregoing, however, we have some misgivings about the organizational structure to be established by the legislation. The absence of a state-wide plan and oversight gives us some concern as to whether response to actual need will not be left to chance, rather than design. Review by the Governor of numerous uncoordinated local plans and a special grant to the State, under Section 108, for coordinating services are poor substitutes, in our view, for mandatory state-wide planning.

We are concerned, furthermore, with the possibility that this program, once operational, will jeopardize the continued existence of the day care centers presently operated by the State. Assuming that Congress maintains a dual system of day care funding -- one under Title XX of the Social Security Act and one under

The Honorable Walter Mondale
Page 2
June 3, 1975

S. 626 -- the State of Maryland would be in the position of operating day care centers in the City of Baltimore, let us say, at 75 percent Federal funding, while the City itself could do so, first at 90 percent, then at 80 percent funding, with all or most of its own contribution provided "in-kind", which is not permissible under Title XX.

Such an arrangement can scarcely be expected to encourage the State to expand or even maintain its day care system in prime sponsors' areas, thus possibly inviting the dismantling of a small but exemplary State program as the State transfers its efforts to the "balance of State". Should this occur, one can envision the initial year or two of the program's existence as a period largely devoted to "musical chairs", with a corresponding reduction in new programs.

We would urge you to consider inserting an amendment which would, at the very least, extend to the states the more liberal funding of the new legislation for day care centers already established with the assistance of Title XX monies.

Sincerely,

Michael R. Dobridge, M. D.
Chairman, State Board of
Social Services

MRD:FB:km

cc: Maryland Congressional Delegation

The Northern Virginia Association for the
Education of Young Children
(NVAEYC)
1501 Cameron St.
Alexandria, Va. 22314

To: The Honorable Senator Walter Mondale
Chairman of the Senate Labor and Public Wlefare Committee
Subcommittee on Children and Youth
Regarding: S626 - The Child and Family Services Act of 1975

The role of public schools in early childhood education is an issue of concern to the No. Va. Association for the Education of Young Children.

It is our position that the needs of young children can be best met by cooperation between the public schools and early childhood educational programs.

As the number of elementary school aged children declines, the public schools have an excellent opportunity to offer much needed space and equipment to early childhood educational programs. The space available in public schools would provide an ideal setting for the implementation of these programs. Transportation services could be coordinated as well as other services and efforts. In addition, by welcoming young children onto their sites, the public schools would be promoting stronger familial relationships.

It is NVAEYC's position, however, that the early childhood programs be separate from the public schools and administratively. Although housed in their buildings, NVAEYC maintains that there is a vast body of knowledge concerning young children, and there are early childhood educators who have expertise in this area. They have been trained to meet the developmental needs of young children - needs which are very different from elementary school aged children. We maintain that elementary school teachers have been trained in and have experience in elementary education. That is where their expertise lies. They should not be expected to implement their elementary educational methods in early childhood classrooms.

If public schools do house early childhood programs, NVAEYC would like to express its concern over the necessity of definitive descriptions of the responsibilities and limitations of both parties.

To support our proposal for separately administered programs, we present as an example currently existing extended day care services.

Speaking to the overall bill, NVAEYC is concerned that the Child and Family Services Bill of 1975 does not account for presently operating day care and Head Start, and does not account fully for the source of money.

We also have some reservations about the amount of authority parent councils will have, since many of the parents will have full time jobs and will thus have limited time for their proposed administrative role.

NVAEYC hopes that all parties concerned with this bill keep sight of the importance of meeting the needs of young children.

Parents Without Partners, Inc.

An international non-profit, non-sectarian educational organization devoted to the welfare and interests of single parents and their children

May 28, 1975

The Honorable Walter F. Mondale
United States Senate
433 Russell Office Building
Washington, D.C. 20010

Dear Senator Mondale:

Parents Without Partners, Inc. has not taken an official position on the Child and Family Services Act; however, I believe I read their concern pretty well, and the following reflects that concern. It is, however, my personal statement.

It is my fervent belief that the legislation encompassed by the Child and Family Services Acts (S.626 and H.R.2966) is not only long overdue but reflects tolerable minimums in meeting the number one priority identified by the 1970 White House Conference on Children and Youth.

Perhaps no other element in our nation is so affected by the lack of those things which the bill provides than the children of single parent families ... nearly eight and one-half million of them.

I would consider the Child and Family Services Acts to be an investment similar to the GI Bill of Rights. The GI Bill, in providing for increased educational attainment, enabled higher earning power for those who participated. In turn, the gross national product and the tax coffers were similarly enriched. The Child and Family Services Act is a similar investment in people which can't help but pay off in the same way.

The "investment" factor aside, it is, as you stated, "the most humane action our nation can take ... "

If there is anything I can do at any time to be of any assistance whatsoever to enhance passage of this legislation, please let me know.

Warmest personal regards.

Sincerely yours,

George B. Williams
Executive Director

GBW:ns

cc: The Honorable John Brademas
The Honorable Caspar Weinberger

International Headquarters 7910 Woodmont Avenue, Washington, D.C. 20014 (301) 654-8850

NAHHA

NATIONAL ASSOCIATION OF HOME HEALTH AGENCIES
LEGISLATIVE COMMITTEE

1715 E. Burnside Street
Portland, Oregon 97214
(503) 233-5441

April 15, 1975

Honorable Harrison A. Williams
United States Senate
Washington, D. C. 20510

Reference: Child and Family Service Act of 1975 -- S-626

Dear Senator Williams:

The bill is primarily geared towards daycare services for children. It is an attempt to extend the benefits of the Head Start Program, and early childhood development program, to families that are out of the formal "poverty range". One of their main focuses is "site or center" with add-on services at these sites such as counseling, health screening, transportation, etc.

Recommend
Include reimbursement, specifically Home Health Services delivered by local certified Home Health Agency.

Why? For example: when there is one parent that has to work, it will not permit some children to take needed services. If a child has speech problems or emotional problems or needs nutritional guidance and is physically handicapped, he needs occupational therapy services, physical therapy services. In addition to these services being available at the site, they must be offered on an in-home basis.

Another example would be that of minority groups with a peculiar set of cultural and environmental circumstances. When the child comes to the "hygienic" rehabilitation facility, or a child guidance center, he doesn't always respond to the needed services that are easily transferable in terms of daily living to the child's life.

We urge you to put in the requirement that where a certified home health agency exists, a local child service agency should contract with the home health agency for various types of services delineated under the act.

We are available to assist in further development of this improvement, should you wish to persue it further.

Sincerely,

Donald D. Trautman

Donald D. Trautman
Chairman Legislative Committee
ddt/sl

Statement of the

AMERICAN OPTOMETRIC ASSOCIATION

on

S. 626

and

H.R. 2966

The Child and Family

Services Act

Submitted to the

LABOR AND PUBLIC WELFARE SUBCOMMITTEES

ON CHILDREN AND YOUTH AND

EMPLOYMENT, POVERTY AND MIGRATORY LABOR

UNITED STATES SENATE

and

COMMITTEE ON EDUCATION

AND LABOR

UNITED STATES HOUSE

OF REPRESENTATIVES

AOA
Washington Office
American Optometric Association
1730 M Street, N. W.
Washington, D.C. 20036
(202) 833-9890

941-10

June 1975

The American Optometric Association commends the committees and the sponsors of the bills now being considered for their demonstrated concern and action for the children of this nation. For surely it is our children who constitute our most precious national resource.

We applaud the efforts of S. 626 and H.R. 2966 to aid and supplement the family in directing the best development of the child. The goal of retaining the eminence of the family is important and necessary.

The combination of health screening and health services along with the other social service provisions of these bills is vital to the overall comprehensiveness of the programs. Vision is an integral component in the total health and development of the child. As closely as vision relates to the learning experience, it in turn affects the social adjustment of the child as well.

Vision problems are never outgrown, they only worsen with time.

The Journal of American Public Health notes that "age 12 should be viewed not as the earliest but the latest age at which preventive care will effectively reach youngsters and achieve its purpose." Of the nation's blind population, 5% are under the age of 20. Writing in the Sight-saving Review, Dr. Edward Davens discussed the situation with amblyopia - one of the most common of vision problems with children and one that can lead to blindness: "Each year approximately 100,000 children are passing the point at which they could be rescued." Yet less than 10% of the children entering our schools have had the opportunity of a vision examination or ever participate in a vision screening program.

In the complexities of care for children, vision is at times overshadowed by other considerations - shelter, food, emergency health care. A child does not usually feel any pain because of a vision problem. The child cannot determine whether he sees correctly. Vision is a learned process and we each learn at a different pace.

The properly functioning vision system is essential to learning - in a formal setting and even before that, in learning about oneself, learning to walk, to relate to other things in ones environment.

The National Eye Institute reports that "vision is the most important of the senses, accounting for over 40% of all sensory input to the brain." Further, 80% of the learning process depends on the correct function of vision.

Many times the child's vision problem may not be the conventional "20/20" problem. There is more to the process of seeing than distance visual acuity.

J. Baxter Sartwout, O.D., explains that

> "those of us in disciplines clinically involved with the underachieving child have progressed far beyond the notion that 20/20 vision acuity is an adequate measure of a child's readiness to learn to read, or an adequate measure of his visual abilities. Teachers who have seen the child with reduced acuity learn to read more handily than another child with 20/20 bear witness that something more than clearness at distance is required. As a matter of fact, my experience would lead me to believe that by far the vast majority of the children in remedial reading programs do have 20/20 distance visual acuity."

What these children do not have, however, is eye focusing control, eye teaming ability ("the balance between information processing and movement"), and visual form perception.

Vision problems may cause or be part of a perceptual problem. Children learn through their perceptions and uncorrected vision can impede this process. In discussing perception and vision, we are concerned with problems in visual-perceptual, perceptual-motor and language areas. In Vision: Its Development in Infant and Child, Drs. Gesell and Ilg and Ms. Bullis explain that "Vision is a complex sensory-motor response to a light stimulus mediated by the eyes but involving the entire actions system." Along with this, "movement is an essential part of sense perception."

Nathan Flax, O.D., of the Optometric Center of New York, briefly analyzes the development of vision:

> "Certain aspects of vision are present and function reflexively at birth. Other aspects of vision and visual perception are a product of growth and learning. The development of vision is neither entirely due to growth factors nor entirely due to environmental conditions but rather an interaction between the two...
> Instead of having to wait for random opportunites to equate visual, auditory, tactile, kinesthetic, vestibular, smell and taste data, the infant is provided with a reflex mechanism to insure simultaneous centering of attention within the environment by more than one sensory modality or sensory-motor system... This yoking together of systems to insure multi-sensory inspection is vital to the development of visual perception."

Thus the faulty vision can lead to problems in areas other than health. Juvenile delinquents display uncommonly high levels of reading problems and learning disabilities, in part related to poor and uncorrected vision problems. Those who are living in what we call a disadvantaged setting suffer even more in terms of vision development.

In terms of general health, it has been noted that perhaps as much as 50% of the children in this nation from low-income groups have health problems unknown to their parents. The health department of the state of Michigan discovered that children from lower-income families displayed twice the vision problems of children from more advantaged families. A study of adolescent health in Harlem revealed that vision was the second most common health problem complaint. Professor Charlotte Muller of the Columbia University Health Research found that visual disability ran 40% higher in poor families than in those with incomes above $7000.

In terms of scholastic achievement and in social adjustment, we see the ravages of uncorrected vision problems. For example, a recent study of Los Angeles elementary students who had reading problems also showed a 54% rate of vision problems. A study of juvenile delinquents in Hamilton County, Tennessee looked at reading levels and vision problems. Of those surveyed, 94% read below their grade levels. Vision tests revealed more failure: 54% failed far seeing; 48%, near seeing; 35% both far and near; 53% perception. Overall, 72% failed one or more of the vision tests. The same study in two consequent years showed a 70% failure rate.

M.E. Woodruff, O.D., Ph.D., describes the visually-at-risk child, one with a higher than normal incidence of vision defects. He stresses the importance of "heredity, prenatal disease, social and environmental influences upon the mother, prenatal conditions, traumas or stresses, postnatal disease or traumatic states, evident ocular or physical abnormality."

Capt. Richard Bohn O.D., while serving at the Wilson Army Hospital, Fort Dix, New Jersey, explains his term "slum amblyopia": "if you don't use your eyes enough, obviously your ability to identify objects will be hindered." In testing children aged three to five, he found "only a few children lacked near perfect vision but the children were not able to see as well as their eyes were physically developed."

Optometrists are at work in the area of children's vision in their own practices with private patients and in programs administered by the federal or state government or by the local community. At school clinics, optometric clinics, community health centers, Early and Periodic Screening, Diagnosis and Treatment - the optometrist is reaching as many children as possible.

One facet of optometric care - developmental vision - serves the child in a special way. Vision training and vision therapy include remedial and enhancement procedures to modify existing visual performance. This modification can be accomplished through the use of lenses and prisms, other special equipment, binocular coordination, visuo-motor dysfunction, visuo-perceptual motor dysfunction and visual-integrative dysfunction.

Because of the absolute necessity of proper vision to function in today's technical socity, the American Optometric Association urges the inclusion of specific language that provides vision care as a part of the proposed program in the Child and Family Services Bill. While the proposed program is a voluntary one, we feel that vision care should be included as a mandatory segment of any health component of the bill.

As our children are the key to the future of the nation, vision is the pathway to knowledge and a full life for each of them.

In conclusion, the American Optometric Association appreciates the opportunity to express its views on the health and vision care needs of children.

The League of Women Voters of the United States

February 28, 1975

Statement for Joint Hearings
by the
Select Education Subcommittee of the House Education and Labor Committee
and the
Subcommittee on Children and Youth of the Senate Labor and Public Welfare Committee
by
THE LEAGUE OF WOMEN VOTERS OF THE UNITED STATES
on
S 626 and HR 2966
"The Child and Family Services Act of 1975"

The League of Women Voters of the United States supports the Child and Family Services Act of 1975 (HR 2966 and S 626) and thanks its sponsors for their continuing efforts to assure adequate child and family services for all Americans.

The League has supported Headstart since its inception, and we are pleased to note that the program's funding is protected under Title I, Section 3 of the act. For several years, we have advocated public support of day care facilities and programs to permit low-income parents to take advantage of training, education and work opportunities. In the present economic situation, in which unemployment among breadwinners is growing and more mothers are forced to seek work outside the home to meet rising living costs, the need for quality child care services becomes even more acute.

The Child and Family Services Act of 1975 not only expands employment opportunities for single and working parents, but offers job opportunities for the poor. Title I, Section 106 requires prime sponsors to hire low-income persons and the unemployed and Section 102 provides for preservice and inservice training of volunteers and paid staff. Title IV, establishing training grants for professionals and paraprofessionals in the child care and family services fields, will help meet future staffing needs. We note also that the mortgage insurance program for construction of new comprehensive child service facilities plus research and demonstration grants under Title III should generate other jobs in segments of the economy which have been hard hit by unemployment.

HR 2966 and S 626 outline a comprehensive approach to family services and authorize adequate funding to carry out mandated programs. The varied educational, nutrition and medical services offered in Title I, Section 102 should meet the needs of children in most communities.

All centers providing services should meet stringent quality standards. The League therefore supports the requirement that educational, health and safety standards be established for all day care centers funded under the act, at least equal to and preferably better than those set forth in the 1968 Interagency Day Care Requirements. We hope that the Title II provision for monitoring and enforcement of criteria set by the Secretary of Health, Education and Welfare and HEW's new Office of Child and Family Services will ensure that developmental, not just custodial child care is available.

In Title I, Section 106, the legislation gives priority (65% of the funding) to economically disadvantaged families, and makes their children eligible for free services. League members have consistently supported mandating the allocation of funds in such a way as to assure the availability of slots for the poor. At the same time, a sliding scale of fees-for-services based on number of children and ability to pay also permits a healthy mix of children from various social and economic backgrounds that will enrich the experience for all participants.

Section 105 and 106 of Title I require community and parental participation in both the planning and operation of all services. We feel these provisions are vital. We also agree that participation in any program should be completely voluntary and only at the request of parents. Parents must continue to have primary responsibility for their children's lives.

The definition of prime sponsorship contained in Section 104, Title I, permitting states, localities or combinations of localities to operate programs, is workable and realistic. The fact that local units of government of any size may serve as prime sponsors permits local control of programs and allows flexibility in meeting specific community needs.

The Child and Family Services Act of 1975 calls for a partnership of parents, state, local and federal government, working together in the interests of America's children. We hope that this year Congress will enact a program that will start the nation toward the goal of adequate services to meet the health, social and educational needs of all our children. Since this legislation is a major step in that direction, we file this statement of support for the hearing record.

GIRLS CLUBS OF AMERICA, Inc.

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July 18, 1975

Honorable Walter F. Mondale
Chairman, Subcommittee on Children
and Youth
United States Senate
Washington, D.C. 20510

Dear Senator Mondale:

Mr. Sidney Johnson of your staff indicated that the Committee was seeking guidance on the issues involved in the delivery system proposed in S. 626 and H.R. 2966. The National Collaboration for Youth has discussed these issues to some extent and hopes that the enclosed statement may be of help to you in your deliberations. The Collaboration will be considering the whole question of the need for child care more fully in its Fall meeting, and would be pleased to be of further assistance to you as you continue your work on this legislative matter.

Enclosed is a statement for the hearing record, submitted by Mr. William Bricker, who as the National Director of Boys' Clubs of America, is now serving as Chairman of the National Collaboration for Youth, which consists of 12 major national youth serving organizations. Eight of those members joined in submitting the statement, as indicated.

Sincerely,

Mildred Kiefer Wurf

Mildred Kiefer Wurf
Coordinator
National Collaboration for Youth

MKW:bp
Enc.

STATEMENT FOR THE HEARING RECORD

The National Collaboration for Youth is a coalition of 12 national organizations providing services to 30,000,000 children and youth throughout the country. These services in aggregate are a comprehensive range of programs for young people six to eighteen years of age, as well as day care programs for children not yet old enough for school.

We commend the Senate Subcommittee on Children and Youth and House Subcommittee on Select Education for turning their attention to the important question of child care and the related support services so needed in our changing society. We particularly are pleased to see in the Mondale-Brademas Child and Family Services Act the principles of expansion of eligibility for services, the recognition that a broad range of support services is essential, the mandating of decisive parent involvement and the establishment of a flexible delivery system which will allow communities to develop their own programs according to locally-determined needs. This flexible delivery system can best be achieved by the present provisions in the bill. The actual delivery of local programs could be carried out by public agencies, including the local schools and private non-profit organizations. We would be most concerned about any change of direction that would permit the use of new public funds for children's services to be made available to programs run for profit.

Our agencies -- all of them non-profit -- have years of experience providing high-quality services for children. We are glad that we, along with local schools and other public and non-profit agencies providing children's services, are recognized as appropriate providers of child care under the new Act. The prime sponsorship provisions in the proposed Mondale-Brademas bills separate grant-making authority from program operation, and require community decision making which cuts across agency lines. We believe this is the best way to assure that program funds are spent according to the best interests of children rather than the self interests of individual organizations.

We trust this expression of our concerns will be of interest to you in your deliberations.

Submitted on behalf of the following member organizations by:

Mr. William Bricker
Chairman, National Collaboration for Youth
National Director, Boys' Clubs of America

Camp Fire Girls, Inc.
Future Homemakers of America
Girls Clubs of America
National Board of YWCAs
National Council of YMCAs
National Federation of Settlements & Neighborhood Centers
National Jewish Welfare Board

July 15, 1975

The American Parents Committee, Inc.
Incorporated in 1947 as a membership, non-profit, non-partisan, public-service association
Working for Federal legislation on behalf of the nation's 75 million children

Kindly reply to office checked:
☐ NATIONAL OFFICE: 52 Vanderbilt Ave., New York, N.Y. 10017—Telephone: MU 5-4400
☐ [redacted]

August 9, 1974

Congressman John Brademas
House of Representatives
Office Building
Washington, D.C.

Dear Congressman Brademas:

The American Parents Committee is pleased to learn of the introduction of the Child and Family Services Act of 1974. At the point when you invite testimony from national organizations, I hope that you will ask the American Parents Committee to testify on the legislation.

For now, we would like to make these comments about the legislation and ask that you insert them in the Congressional Record or in the Hearings record.

The American Parents Committee commends Senator Mondale, Representative Brademas and the other Members of Congress for their sponsorship of new child and family focused legislation.

We believe that this legislation is very important, because it will help spark the kind of discussion and examination of the needs of children and families that is required if we are to arrive at sound legislative proposals.

We are extremely impressed by these features of the legislation:

- The bill provides new money for additional, badly-needed services for children and families.
- The standards will ensure that services are of good quality.
- There is specific funding for enforcement of those standards.
- Services to be provided will be free to many of those who need them most.
- Participation in all programs and services will be voluntary.
- An important role is mandated for parents.

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BERNARD LOCKER, Social Welfare Consultant, Washington, D.C.

Secretary-Treasurer
STEPHEN J. LYNCH, V.P./Finance, Parents' Magazine Enterprises, Inc.

Executive Director
(in Washington Office)
[redacted]

The officers, directors and National Council members of the American Parents Committee, Inc. may not personally endorse (nor are the organizations with which they are associated in any way committed to) all legislation favored by the APC. The APC's position on Federal legislation for children in which it interests itself is determined by its Board of Directors, which gives its approval only if a majority of its members concur.

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(Continued on reverse side)

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(Listed alphabetically by States)

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DR. URIE BRONFENBRENNER, Professor, Psychology & Human Development, State College Human Ecology, Cornell University

HON. EUGENE A. BURDICK, District Judge, Williston, North Dakota

DR. RALPH H. OJEMANN, Educational Research Council of Greater Cleveland

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MRS. HORACE SAWYER, former Chairman, South Carolina Committee on Children and Youth

DR. ROBERT B. AIKEN, M.D., M.P.H., Commissioner, Vermont State Dept. of Health

DR. ROGER P. ELSER, Dir., Special Education, Dept. Education, Charleston, West Va.

ARTHUR P. MILES, Director, School of Social Work, University of Wisconsin,

MRS. W. H. DOUGLASS, former Chairman, Wyoming Youth Council

Congressman John Brademas August 9, 1974

The American Parents Committee will work with the Congress on this legislation, which will greatly improve living conditions for many children and families.

Cordially yours,

GEORGE J. HECHT
CHAIRMAN, AMERICAN
PARENTS COMMITTEE and
PUBLISHER, PARENTS'
MAGAZINE

GJH:kk

STATEMENT OF MRS. CYNTHIA C. JONES, PAST PRESIDENT AND BOARD MEMBER OF PARENT COOPERATIVE PRESCHOOLS INTERNATIONAL, HOME AND SCHOOL INSTITUTE ASSOCIATE, AND PROFESSOR PRESCHOOL AND DAY CARE ADMINISTRATION, TRINITY COLLEGE.

Mr. Chairman and Members of the Committee: Parent Cooperative Preschools International and the Home and School Institute are pleased to speak in support of legislation which furthers the health and well being of children so effectively as the Child and Family Services Bill. There are 100,000 parents with children in cooperative non-profit nurseries who support good child care for all children.

This bill would strengthen and extend community appreciation of parent education for adults and preschool education for children.

This bill seeks to promote desirable standards for childrens programs, practices and conditions and encourages continuing education for parents, for teachers and for directors.

Hopefully this bill would promote an interchange of information between these children's programs, other federal children's programs, such as Headstart, nursery schools, kindergartens, and other parent sponsored preschool groups.

It would also be hoped that centers funded under this bill would cooperate with family living, adult education, and early childhood education organizations in the interest of more effective service relationships with parents of young children. The Education Commission of the States in their booklet "Alternatives for Program Implementation in the States" say that the least expensive way to reach all of the children (in a state, or in the country) is to reach all the parents. I see this bill as a big step forward in furthering this goal.

High standard child care should be easily recognized and available. I applaud the inclusion of the 1968 Federal Interagency Day Care Requirements for all programs. Today high standard child care is difficult to purchase by any parent at any price. There are some high standard centers available for children of low-income families, but only 1/6 of the need for Day Care is being met in this country today. Middle class parents who are willing to pay cannot even FIND quality day care. By allowing sliding scale centers, with some children allowed to pay full fee, you are not only encouraging a better mix of children, you are putting children into a non-segregated (by income) situationtoday which will help them better cope in the world tomorrow.

Financial background alone does not turn out able citizens, as we are learning only too well. The children and youth of America need the benefit of good child care at home with informed parents, and in centers of high quality, if this country wishes to find solutions for some of its larger problems such as; violence, drugs, child abuse, prejudice and alienation.

The mother is the child's most potent teacher. Research is proving this over, and over, and we support this bill because it fosters active parent involvement as well as high standard care.

ROLE OF THE PUBLIC SCHOOLS

The great fear of early childhood parents and educators of appointing public school systems as sole prime sponsors of this or a similar bill is represented by their track record of non-existing and badly understaffed kindergartens. When the public schools are allowing one teacher for 31-35 kindergarteners, when the reccommended number for kindergarten is 20 five year olds; how are we to believe that there will be one staff person for every 5 four year olds, to meet the 1 to 5 ratio called for in the Federal Interagency Day Care Requirements? The Co-op nurseries, as community based child care groups feel that such a public school delivery system would not allow for maximum parental involvement and flexibility.

We have a successful model of adding two years onto the public school education of k-through-12 in the Community Junior Colleges across the nation. At no time did the public school systems or the teachers unions say "we must be the only group to run there community coleges". It is just as unrealistic for elementary and secondary school trained personnel to run early childhood programs. However in the community colleges we have a precedent for further developing and extending the program offered free, or at low cost, for public education to all children in America.

Since few buildings in communities today can support the heavy-duty use of 30-60 or 100 children 10 or 11 hours a day, I reccommend that public school classrooms be used on a rental or otherwise locally negotiated basis. As public school classrooms are becoming empty due to the dropping birth rate this solution to a day care problem of construction of facilities has several benefits for communities.

The Santa Monica Unified School District in California has a Day Care Center located on Junior High grounds, and they are very happy with the combination. Junior High boys and girls enjoy helping in the Day Care Center and gain learnings for future parenthood. The Day Care Center benefits from using these additional volunteers to lower their ratios to insure every child adequate individual attention.

The liason between local school boards and prime sponsors meeting local day care needs is yet another reason why the prime sponsorhip should be kept to groups of 10,000 in a system of state and local governmental prime sponsors including educational institutions and other public and private non-profit grantees. The great variety of both school systems and prime sponsors would thus allow more flexible solutions to individual local problems. Community based, non-profit groups are much more likely to meet the unique needs of the racial, economic, bi-lingual, bi-cultural children and parents in any given community.

ROLE OF FEDERAL, STATE, AND LOCAL INVOLVEMENT

If federally funded programs with Federal Interagency Day Care Requirements enforced, are administered through a variety of types of prime sponsors whether educational non-profit organisations, or state or local governements, these programs will plug into a number of quality standards enforcing groups already in existence. We can learn from the successful programs overseas. The co-op nursery systems in both Britain (Preschool Playgroup Association) and New Zealand (New Zealand Play Centre Federation)/are receiving funding under a bill such as this one, in order to incorporate disadvantaged families into their programs on a large scale and for the amount of day care that is needed.

Play Centre inspectors inspect new centers before federal(or state)inspectors inspectors do before a new center may receive its "setting-up grant". Play Centre inspectors offer additional advice and support to the center and work with the group to insure a very good center that *they* would be proud of.

It is interesting to note that the federal agency in Great Britain funds centers (through a local governmental office) that meet a "special social need" as defined locally within these guidelines:

1. Providing additional Day Care slots,
2. Providing slots for handicapped children,
3. involving elderly persons in the center.

A useful idea from New Zealand is this "setting-up Grant" which provides funds to cover the start-up costs of a center AFTER the center is opened and has met high standards. Money for opening the center may be borrowed from a bank against this "setting-up grant' which is usually paid six to twelve months after opening. Another idea is the giving of "special use grants' of $200 to $1,000 to small or profit-making centers to enable them to meet standards and remain in business, or to qualify for funds under this bill. Purchasing commercial kitchen equipment, improving playground or indoor equipment, are typical uses of these 'special use'grants.

Some states have very high day care standards (Maryland is one) with good systems of Day Care Coordinators for each county administered through state and county Health departments. While I strongly feel every state should have a Department of Child Development and AVOID the hassle of whether funds will be received through the Health, the Education, or the Welfare departments for disbursement to young childrens' programs, licensing and accreditation where desired, could still be handled by existing departments of health and education. In Quebec province in Canada, a provincial "Inter-Ministerial Committee" representing the Ministers of Health, Education, and Welfare, administers Child Care concerns. Our states would need such a committee or a Child Development Department or a State 4-C Committee (community coordinated child care) to administer the funds from this bill in such a way as to insure input from Health and Education (most frequently omitted) and Welfare Departments without allowing those three departments to spend all their time fighting over the money and ignoring the children.

There are 25 Co-operative Nursery Councils of 25-2,000 nursery schools each. In Michigan and California these councils number more than 10,000 in number and would be eligible as prime sponsors to expand and develope services under this bill. They are currently running impressive support systems to all of their child-care programs: workshops, Conferences, training for parents and teachers, printed manuals, visiting consultants, magazines, and newsletters. It is this support at every level of administration and delivery that I would like to see as an integral part of programs funded under this bill. A variety of types of prime sponsors and administration of "sub-sponsors" could help to promote this level of support and training to centers. I do not think one "recipe" will fit every state and county given the variety in state and county governments. State, county and local governmental units should be used, but other groups that meet the standards should also be given priority for the reasons given earlier.

Rockville (Md.) Presbyterian Day Care Association

As an example of the need for this bill I would like to share a sad story with you. For 2,000 years churches have been trying to meet gaps in the societies where they existed. Hospitals, orphanages, and schools, are types of institutions supported by churches which have gradually come under the wing of responsible government. In recent years a gap in our society in America, that churches have been trying to fill has been the need for housing preschool nursery and day care groups. Child Care is generally not profitable and no one wants it: not state governments, not county governments, local governments, or industry. No one needs it, but the children (and the parents).

Rockville (Maryland)Presbyterian Church has been housing a center that was ranked with the 40-50 top day care centers in the country by Abt Associates in 1970. It serves 60 full day care children, the majority of whom are under full purchase of care--$6.25 per day from federal funds of the $7.25 per day actual cost. All of the children are from low income homes and 80% are from single (working) parent homes. Fifty more children participate in a before and after school program. One hundren and ten hungry children receive breakfast before school.

Now the church has asked them to leave by July 1, 1975. It is a small church of 350 members and they do not have the resources to maintain the building constantly for this heavy use by the children. After five years walls have cracked, pipes broken, ceilings fallen down. All these things have been repaired, and the building is not unsafe--just not strong enough for day care, as it is inexpensively built. A short-term grant for strengthening the building would solve this problem. Until this bill there have been no funds for construction.

No one in the community is able to take over an operation the size of this day care center, I should add. The only church of a size large enough is hesitant to offer their light weight building in view of the current problems. The schools in Rockville are all at capacity so that type of space is not available from the school board either. This is representative of the plight of day care in America today: no one wants it and no one can handle it without help.

PROFIT-MAKING CENTERS

It is inappropriate for the federal government to fund profit-making centers, except for small, one-time "seed grants" for improving equipment, and similar uses. Since a 50% parent board is required anyway, these centers should incorporate as non-profit educational organizations. This step would have tax advantages for the center and would insure that policies affecting the children would not be a unilateral prerogative of a proprietor.

Day Care does NOT return a large profit unless the care is inadequate, so this great worry about profit-making seems to be a false issue to me. Control may be the true issue and this is provided for in in the requirements for a Board for the center. A director who shares his ownership with an incorporated Board could allow a substantial salary for himself as he will certainly be earning it. Directing a Day Care Center is a big job. How are profit-making hospitals handled? Child care services should be handled with the same rigid inspection system and lack of blatantly selfish interest.

* * *

In closing I would like to say that 100,000 parents in co-op nurseries support good child care for the nation's children. We feel that all parents in America should have the opportunity to participate in high quality children's programs, and to be right in there, learning also.

Thank your very much for the opportunity to testify.

Cynthia C. Jones

FAMILY COUNSELING SERVICE
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March 1975

The Honorable Walter F. Mondale
Senate Office Building
Washington, D.C. 20510

Dear Senator Mondale,

The Board of Directors of the Family Counseling Service of Northampton County commends the introduction on February 7, 1975 of the Child and Family Services Act of 1975 (Senate bill 626).

We support particularly the bill's statement of purpose, which rests on the premise that the family is the primary and most fundamental influence on children. We believe the role of the family should receive even more stress in the service programs provided by S. 626. Children cannot easily be singled out from their families, as has often been the case in previous legislation. Our preference would be for the bill to provide services, on a voluntary basis, to families, i.e. parents as well as children and together, rather than limit it to children. We also wish to see incorporated in the final version of the bill clearer definitions of child and family services.

We agree with the emphasis on quality of services, and their availability to a broad range of families who need them. Providing such services free for lower-income families and at a fee for those with higher income is in accord with our own schedule for services to clients. Therefore, we think that in section two, it would be appropriate to specify private, nonprofit organizations as a part of the partnership of prime sponsors and family service councils defined in sections 104 and 105.

You may be sure that we shall follow with great interest and careful attention progress and passage of the Child and Family Services Act of 1975.

Sincerely,

Joseph M. Reibman
President

jmr/s

AMERICAN PERSONNEL AND GUIDANCE ASSOCIATION

May 29, 1975

The Honorable John Brademas
U.S. House of Representatives
Rayburn House Office Building-Room 2134
Washington, D.C. 20515

Dear Congressman Brademas:

On March 26, 1975 during the American Personnel and Guidance Association's annual convention in New York City, the Association's Senate passed the following resolution concerning Support of Funding for Child and Family Services.

WHEREAS, The American Personnel and Guidance Association reaffirms its belief in the need to recognize that children are the most important resource our nation has; and

WHEREAS, The APGA emphasizes the importance of the first six years in a child's development; and

WHEREAS, The APGA recognizes the need to provide adequate child care facilities for children whose parent(s) must be out of the home during the day; and

WHEREAS, The need for adequate child care facilities must include counseling and guidance services;

THEREFORE, BE IT RESOLVED, That the APGA as the Professional Association of counselors hereby strongly endorses the Child and Family Services Act of 1975; and

BE IT FURTHER RESOLVED, That the APGA strongly endorses and supports this important piece of legislation and urges the Congress and the President fully commit the legislative and administrative branches of government to support this legislation, including a core of professional counseling services; and

BE IT FURTHER RESOLVED, That this resolution be communicated to members of the Congress who are involved in the development and passage of this legislation and to the President of the United States.

Because of your interest in this matter and the intent of our resolution which has the backing of our 39,000 national membership of guidance and counseling workers, the above has been forwarded to you.

If you need any clarification or wish further information, please feel free to contact us.

Sincerely,

S Norman Feingold
S. Norman Feingold
President

Charles L Lew
Charles L. Lewis
Executive Vice President

CHILD CARE POLICY: MAXIMIZING FAMILY CHOICE

by

Shelley Kessler

and

Susan Hunsinger

STAFF WORKING PAPER
PREPARED FOR THE
CARNEGIE COUNCIL
ON CHILDREN

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Shelley Kessler
Susan Hunsinger

For most Americans, "day care" still rouses visions of children robbed of care. At best, it's a vision of regimentation, of children abandoned to uniform rooms, uniformed professionals, and activities performed in unison--eating, being quiet, going potty, all according to the staff's timetable, not the children's. "Day care" is seen as something like an extended hospital nursery, where parents trust their child will be safe but fear the name-tags may get mixed up, the child's identity lost. At worst, "day care" summons visions of outright neglect, of babies left untended in cribs or infant seats, of toddlers playing in squalid rooms where the only "toy", a television, is a virtual tranquilizer, perhaps supplemented by a chemical one.

The nightmare is more than fantasy. Of 4 million existing day care arrangements in the United States, over 3/4 remain unlicensed, with no enforced limit on the number of children per caretaker.[1] While it would be unfair to equate "unlicensed" with harmful, one nationwide survey attempt concluded that most existing day care facilities are so poor in quality as to call for immediate replacement.[2]

The question, therefore, is not whether day care, but what quality, what kind, and for whom? Over half of the 6 million preschool children of working mothers are already in some kind of day care arrangements outside their homes, primarily with neighbors or relatives. Between 1965 and 1970 the number of children enrolled in day care centers more than doubled, accomodating 10% of the preschool children of employed mothers. Family day care--or care in a non-relative's home--provided care for another 19%, but only 2% of these arrangements are licensed.[3] Meanwhile the increase in family mobility away from other relatives, and the decrease in available household workers has made in-home babysitting a luxury increasingly beyond middle-income reach.

While many working parents still manage to make in-home child care arrangements, these often bring on their own nightmares--older children encouraged to stay home from school to care for younger children, parents who work staggered hours and never see each other. Finally, an estimated 1/10 of children aged 2 to 12 are regularly left alone.[4]

Some opponents of day care argue that the depressed economy will soon send working mothers back home, reversing the trend toward day care use. However, at least half of the nation's working mothers are single parents or live with partners whose income is less than $7,000 a year. As MIT economist Mary Rowe notes, "No one wants [these women] out of the labor force."[5] The remainder are often working to hold back the tide of rising prices compounded by the threat of their husbands' lay-offs. Furthermore, the sheer number of women now working--a majority of all women ever married, 1/3 of mothers with children under 6 and 30% with children under 3, (6)--gives their position in the labor force more permanency. Even if women were forced to absorb all the unemployment--a possibility made less likely by federal laws prohibiting discriminatory employment practices against women-- a substantial place for women in the labor force would probably remain.

Yet, the need for quality day care does not depend on the existence of working mothers alone. The primary need is rooted in the changing nature of the American family itself, a unit which is rapidly shrinking, growing more isolated and ingrown. Fifty years ago, notes psychologist Urie Bronfenbrenner, half of Massachusetts households included at least one adult besides the parents; today the figure is only 4 percent.⑦ Despite America's honeymoon with the two-parent, two-car family, the pressures of increasingly urban, isolated childrearing have proved too great. If two parents find it difficult to raise a child alone,

what about the growing number of single parents who bear this role? By 1974 13%, or one out of eight children under 3, were living in single-parent families, nearly double the rate a decade ago.[8]

Whether circumstances force one parent to bear the exclusive child-rearing responsbility, or merely the "8 to 6" responsibility, the burden may be too great. The rising divorce rate, Bronfenbrenner notes, has "recently been accompanied by a new phenomenon: the unwillingness of either parent to take custody of the child," with increasing numbers of young mothers fleeing before waiting for a formal separation. The increase in child abuse may also be related to the burden of isolated child-rearing, with a large proportion occurring in single-parent homes and inflicted by the parents themselves. A 1970 survey estimated there are from 2.5 to four million battered-child cases a year, with 90 percent taking place in the child's own home.[9]

Less dramatic, but nevertheless important, is the sense that a parent's isolation from other adults may decrease his satisfaction in parenting. With fewer adults around, new parents have fewer models for good parenting, not to mention fewer contemporaries to share the joys and frustrations of child-rearing. Most adults need to be actively engaged with other adults in activities which are both personally and socially valued; otherwise they feel alienated and depressed--they stop growing. And depressed parents do not have much to give. They are more likely to withdraw from taxing interactions with children which require discipline, consistency, or creativity--in short, from the interactions most essential to a solid parent-child relationship.

Furthermore, regardless of how successfully a parent may cope with isolated child-rearing, the child may need access to more adults as well as children. Growing up in a small urban family can limit a child's opportunities for observation and interaction. By age two, children not only need exposure to more physical spaces, but exposure to more adults as well. Yet, with the breakdown of old communities, the responsibilities of parenting are increasingly falling on young mothers alone. "I try to compensate with toys," says a mother of a 3-year-old, acknowledging that plastic resources are often more accessible than human contact. What is needed is a supply of fresh recruits--some adults available in the wings to help ease the burden of isolated child-rearing. Since it is unlikely many Americans can recreate the extended family, public policy should promote a system of "small family" support, including the right to quality day care, whether the parents both work part-time, full-time, or not at all.

Far from suggesting that any day care is better than no day care, federal policy should nevertheless start with the reality--that day care already exists and that the changing nature of the family has created a need for it. Federal day care policy should first aim to upgrade existing day care arrangements and then to expand the supply to insure every family's right to quality day care--whether in the form of access to a twice-a-week stay at a drop-in center, part-time care in family day care, or full-day care in a group center. Concretely, the best way to expand the supply may be to upgrade existing family day care, and the best way to upgrade it may be to cluster networks of family day care homes around day care centers. While funds should come primarily from the federal government, to promote diversity and avoid regimentation, day care facilities should be administered and controlled by local boards dominated by the parents themselves. To guard against any tendency to make day care obligatory, federal day care policy should be coupled with incentives to employers to provide more part-time jobs, job reinstatement rights for parents who take child-care leaves, tax deductions to ease the burden of in-home babysitting, and income supplements to the parent who choose to remain at home during the early child-rearing years. In short, federal day care policy should aim to promote more care for children, whether performed in or outside the home.

Estimates of Day Care Needs

Before outlining specific goals for a federal day care policy, we will first attempt to estimate day care needs. Estimates of need depend upon how services are defined: If "day care" means full-day, group center care for 3-5 year-olds, a low estimate is likely to result. However, we use a broader definition, including part-time and even occasional care, family day care as well as center care, after-school care for older children as well as preschool care. After-school care is crucial because recent studies indicate that at least 1/2 of all child care arrangements occur outside the normal 9-5 working day.[10]

Estimates of day care needs also reflect underlying presuppositions: "But I think of day care as something for the poor" sums up the middle-class dismissal of day care. We acknowledge that current day care, particularly center users /are predominantly poor. But when day care is defined as any kind of extrafamilial supplement to parents' care, then what was hitherto seen as a low-income need becomes a middle-income need.

Once "working mother" was synonomous with "poor mother"; now 70% of middle-income families have two parents working.[11] Once middle-class values paid tribute to the mother who never strayed from her house-wifely pedestal; now many women feel, as Mary Howell puts it, that "it is a criminal waste for a woman to devote a lifetime to the cleanliness of a single family."[12] Not only is the proportion of college-educated, career-trained women increasing, but the expectations of these women are changing rapidly. In 1965, 70% of Stanford University women students said they would not work at all when their children were under age 6. By 1972, only 7% said they would stop working to rear children.[13] In short, in spite of continuing middle-class distrust of existing day care facilities, the middle-income need, or market, for day care seems to be expanding.

What we are arguing is that the primary criterion for day care need is not income, but the total family situation. The neglected group, with respect to day care, is not so much welfare recipients as it is low-and middle-income working parents. Day care is not primarily a cure for poverty, or family pathology, but a social utility, a "well-family" support. This is not to say that the federal government should provide *free* day care for all families who need or want it, but that it should ensure *access* to quality day care, with the poor paying little, the affluent paying full costs, and those in between paying what they can.

How great is the need for day are? It is impossible to compute the need for new day care "slots" in precise quantitative terms. There are no up-to-date surveys of either supply or demand.[14] Perhaps the best one can do is to look at some trends suggestive of the potential marekt for day care and then to address the issue of quality of existing arrangements. Bureau of Labor Department statistics indicate that there are 6 million preschool (age 0-6) children of working mothers,and that the fastest rise in employment of women is among those with children under 3. In addition, there are at least 2 1/2 million children under 6 living in poverty whose mothers are not employed, 2 1/2 million children who are disabled or have other special needs,* and 7 million children (age 6-11) of working mothers who may need after-school care. In all, 18 million children may require some form of extra-familial child care.

How many of these 18 million children do not have "adequate" care how?

---

* We have not yet found a reliable estimate of the number of handicapped children under 6; this figure represents an educated guess.

Efforts to evaluate existing arrangements are hampered not only by the disparity in what is considered adequate, but also, as stated above, by the lack of an up-to-date survey. The last major federal survey (Spindler and Low: Child Care Arrangements of Working Mothers in the United States) is based on 1964 data. A more recent study (Keyserling: Windows on Day Care) conducted by the National Council of Jewish Women in 1970 focuses sharply on the deficiencies of existing arrangements, but it makes no pretense at a scientific sampling.

Nevertheless, despite the shortcomings of available data, it may be useful to make some guesses about the amount of inadequate care. The Keyserling study concludes that at least 3 million of the 4 million existing out-of-home child care arrangements (including day care centers and family day care homes, licensed and unlicensed) provide grossly inadequate care. In addition, based on Spindler-Low findings, one-third of the children of working mothers receive inadequate home care--some of these children care for themselves, some are cared for by a sibling under 16, some by a father worn out from working the night shift, some by a relative who drinks or is otherwise incapacitated. If we project this "one-third" percentage onto the 18 million children who may need child care, 6 million American children are receiving inadequate "home care". Added to the 3 million children who may be receiving inadequate/ out-of-home care, a total of 9 million children may now lack suitable care.[15]

So much for the numbers game. Are present child-care arrangements really this bad? Arthur Emlen, based on field studies of family day care in Portland, Oregon, argues that while some unlicensed home care is bad, "some of it is excellent, and most of it is satisfactory."[16] But his survey, while more systematic than Keyserling's is not broad enough to be conclusive and tends to underestimate the difficulties involved in making family day care work. (see pg. 18-20). Furthermore, so long as 10% of the children of working mothers are being left totally unsupervised,* and 90% of family or group day care remains unlicensed,[17] child care is being left to chance. While no one knows for certain how many harmful child-care facilities exist, the Keyserling study uncovered some horrors: "In several homes there were infants tied to cribs, toddlers tied to chairs, and 3-,4-, and 5-year-olds coped as best they could, often playing amid broken glass, with rat-holes evident." While one may argue that no parent has to leave his child in such a place, many parents neither know of nor can afford better alternatives.

Furthermore, no matter how inadequate existing day care facilities are, there are simply not enough. The states document the shortage. North Carolina reports that it can only meet 1/3 of the needs of AFDC mothers who want day care.[18] Alaska is no longer able to provide day care for former welfare recipients who want to work.[19] Even California, which along with New York has the most day care, says an estimated 160,000 child care places are needed just to meet the needs of low-income families.[20]

Given the '60's rhetoric about day care, it may seem surprising that such a drastic shortage could still exist. Without delving into the politics of day care, which will be discussed in a later section, it is clear that the rhetoric has far exceeded the expansion of services. Although the 1960's produced a rash of federally sponsored day care programs, the total federal expenditure for day care is $1.4 billion--[20a]enough to serve only a small fraction of the 6 million children with working mothers. This money has been split among 12 separate federal funding sources, ranging from the Office of Child Development to the Small Business Administration. In all there are 61 separate federally funded child care programs.[21] Money is further wasted in the transfer from federal to state to local level.

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* Keyserling thinks this is an underestimate: "Few mothers will answer, when asked by a census taker, that they were totally unable to make any arrangements for child care."

Federal day care legislation has also tended to segregate children by fostering public day care for the poor, tax-deduction subsidized home and private nursery school care for the affluent, and nothing for those in between. The two largest federal funding sources, the Social Serivces Act and the Economic Opportunity Act, both focus on services for the poor. Meanwhile, income tax deductions ($200-a-month for out-of-home child care and $400-a-month for in-home care for those with incomes up to $44,000) tend to benefit upper-income families. "Caught in the squeeze of this dual subsidy structure," according to a California Department of Education study, "are many low and moderate income families who neither qualify for AFDC assistance nor draw major benefits from the tax deduction, either because their tax liabilities are eliminated before the child care deduction is added in or because they are not able or do not choose to itemize deductions."[22]

When assessing the longer-term need for day care, it is to this group of low-to-moderate income families that we especially look. If day care were free, geographically convenient, of the right kind, and available at hours appropriate to family needs, economists Rowe and Husby estimate that up to 90% of the nation's preschoolers might use it at least part-time.[23] Ultimately, however, it is impossible to estimate an upper ceiling for a projected service, especially since federal day care policy should aim to maximize parental child-rearing choices, enabling some parents now working to choose to stay home.

Before further documenting what's wrong with existing child care options and setting forth policy goals to improve them, we will first look at how day care's current problems date back to its American origins.

History's Policy Peril: Day Care Vs. Poverty

Both our short-term and long-term estimates of day care needs assume that day care should become "a normal part of American life,... [no longer] a substandard service stigmatized by its [exclusive] association with welfare and custodial care"[24]. This all-American vision of day care contrasts sharply with its 100-year history in the United States. Throughout that history, reformers and policymakers have defined the need for day care in terms of the problem of poverty, indeed as one solution to poverty. Like other forms of public assistance for the poor, day care has most often been provided "as a last resort,... exercised with disrespect, cynicism, and caution--or out of a pity that erodes human dignity, a kindness that treats adults like children...Given these attitudes, it is no surprise that so many families see public day care as a demeaning handout rather than their right"[25].

Actually, the need for preschool care as a support to normal, "unpoor" families was recognized as far back as the 1920's. At that time the nursery school movement grew out of a new appreciation for the importance of the early childhood years and out of concern that demographic changes were adversely affecting child-rearing. Nursery school proponents argued that "modern conditions"--small families, apartment and tenement house living, the increasing numbers of middle-class working mothers--were all tending to isolate the child from other families, to limit the child's contacts with peers and adults, and to reduce the free physical space children need to grow and thrive. Nursery schools could provide a child-centered atmosphere, including opportunities for free play with other children, as well as stimulating contacts with child-oriented adults. Yet, nursery schools, while sharing many of the goals we seek for public day care, have been restricted to those who could afford to pay--either the steep prices for private nursery schools, or the leisure time necessary to participate in nursery school cooperatives. Nursery schools have rarely geared their hours or services to suit the needs of working mothers. In short, nursery schools have functioned more as a middle-income extra, like piano lessons, than an essential service.

In contrast, day care has from its late 19th century beginnings* served the working mother, which at that time meant the poor mother, and usually the immigrant mother. "Day nurseries", as they were originally called, catered not to the "unworthy poor," who lived off public relief, but to the "worthy poor," who were willing to work. The earliest day nurseries saw their role partly as employment agencies, seeking suitable domestic work for mothers, while caring for their children--infants, schoolage children, as well as preschoolers. Day nurseries also sought to acculturate immigrant mothers, not in the wonders of child development,but in the proprieties of cooking, cleaning and sewing, so that they could care for their children in the American way and better perform their new domestic jobs.

Although day nurseries were primarily developed to enable poor mothers to work, they also sought to uplift, or Americanize, their children. Unlike nursery schools, which sought to supplement adequate family life, day nurseries tried to correct or compensate for the presumably inadequate poor immigrant family. In part, the nurseries simply sought to offer healthier physical surroundings than the children's tenement homes. But the nurseries also saw moral training for good citizenship as their chief educational goal. It was fine to encourage mainstream nursery school children to play spontaneously, to develop their interests naturally, but society could not afford to take this risk with the poor. In acculturating immigrant children and their mothers, in facilitating the employment of poor women, in bringing poor families into contact with the rich (the charity women who administered the nurseries), the early day nursery was viewed as a social stabilizer, an important component in the solution to poverty.

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* Although day nurseries began in the 1850's and 1860's, the movement did not get underway until the 1890's.

From time to time, public day care in the United States has strayed from its image as an antidote to poverty. On the one hand, after World War I, when the government provided "mother's pensions" to help the "worthy poor" mother stay at home, day nursery use declined. Since only the "unworthy poor" now needed to work, day care became totally disreputable, more a storehouse for the poor than a philanthropic answer to their poverty. On the other hand, during World War II, public day care centers vastly expanded to serve the many mothers from all income levels pressed into the wartime work force. Day care became almost patriotic. For the first time, the federal government under the Lanham Act committed extensive funds to day care--over $51 million during the war years to serve one and a half million children in over 3,000 centers. However, even this committment was self-consciously temporary. Following the war, funds were cut off, a media campaign maligned day care as unAmerican, and once again, day care was seen as a last resort, to be used only for "problem children" from economically or psychologically marginal homes.

In the 1960's, day care again gained a measure of respectability, largely because of the increasing number of middle-income mothers joining the labor force. Other factors contributing to new acceptance of day care included the women's liberation movement, expanded use of nursery schools, new psychological research challenging previous assumptions that maternal separation or multiple mothering necessarily hurt children, and a belief that early childhood education, as embodied in Head Start centers, was the best way to wipe out poverty and social inequality. Nevertheless, while federal spending on day care increased significantly throughout the sixties, the split pattern of services remained: public day care for the poor, private nursery schools or child care centers for the affluent, and makeshift arrangements for those inbetween.

Although day care has had its ups and downs and interesting turnabouts, one problem has remained constant--rarely has there been enough day care, largely because the "need" has been defined in terms of poverty. Day care needs have often been neglected on the grounds that day care threatened the integrity of the family. To "respect" the family has meant to leave it alone. This attitude has arisen partly from a legitimate appraisal of the poor quality of programs targeted at the poor, and partly from the assumption that any future publicly sponsored programs must be as coercive and disrespectful as past programs for the poor have been. Finally, the non-interference policy has rested on the notion that a truly American family is a self-sufficient family.

Opposition to day care has frequently been based on the fear that women's employment itself threatens the family--undermining the husband's role as responsible breadwinner, and undermining the mother-child bond. Since day care might encourage more women to work, it was only justified in families where the alternative was total dependence on government aid. Thus, even day care's defendants were quick to support socioeconomic reforms they thought woule eliminate the need for women's work, and, hence, for day care.

In the 1920's, Progressive reformers thought Widow's and Mother's Pensions, minimum wage laws, unemployment compensation and accident insurance would eliminate day care by either stabilizing the husband's income or providing an alternative income source, thus enabling mother to stay at home. Important as these reforms were for their own sake, women continued to work in increasing numbers. The reformers who focused exclusively on changing underlying socioeconomic conditions tended to neglect the needs of children of working mothers.

Throughout its history day care has been seen not primarily in terms of the needs of children, but as a necessary evil to fight poverty. The early day nurseries facilitated the employment of poor mothers, the recent WIN (Work Incentive) program has used day care to coerce welfare mothers to work, and Head Start Centers have been promoted as the best way to break the poverty cycle. Yet, when defined in terms of its effect on poverty, day care suffers and poverty suffers. Viewed primarily as an antidote to poverty, it's not surprising that many policymakers find day care ineffective, a poor second best to such structural reforms as income supports or redistribution. To provide day care in order to give poor women a half year of training or a low-paying job, or to give her children a year or two of enriched care, does little to uproot the root causes of inequality. In fact, viewed this way, day care's primary effect may be to allow the public to ignore the need for structural reforms.

With the force of a hundred-year-old tradition, it has become habit among policymakers to mention day care and structural solutions to poverty in the same breath. Yet day care should not have to compete with income maintenance or redistribution. The need for day care--for children of working parents, single parents, disabled parents, or just plain tired parents--exists separately from the need to reduce poverty and its suffering. Even if poverty no longer existed, the need for good quality day care for large numbers of children would remain. Both day care and structural reforms need to be set in motion to meet the current and future needs of America's children.[26]

Existing Options: Too Little Care

Rarely tailored to meet the needs of children per se, public day care in the United States has itself been treated like a neglected child, -- under-funded unsupervised, uncertain of survival. Not surprisingly, existing day care options leave much to be desired. Current arrangements often fail to provide two components that seem essential to any child care worthy of the name: caretakers who, in fact, care and continuity of care.

A caretaker should be a warm, dependable person responsive to the needs and capacities of young children, not a person who feels compelled to pigeonhole or berate children for not living up to some idealized version of what a child is "s'posed to be." Moreover, no matter how ideal the caretaker's personal qualifications, if he or she is held responsible for too many children, the potential for care breaks down.

Continuity of care is a difficult term to pin down. Some mistake it to mean an intense, unrelieved relationship with one parent (usually the mother) and only one parent. Others dismiss it as the mere continuous presence of an adult in a child's waking hours. Continuity in child care need not mean that one person is available to the child on a continuous basis. However, when more than one person is caring for the child, continuity requires that the caretakers communicate freely and in detail about what the child has been doing, what his quirks are, so that each caretaker may benefit from any new cues or signals the other has picked up. The purpose of continuity is to ensure that the child experiences some consistency, some predictability in the way his/her needs are met. The younger the child is, the more crucial is this consistency to the child's development of trust, a trust basic to all other aspects of development, whether social, physical, or cognitive.

Although money may not be able to buy care, it helps to attract qualified caretakers. Similarly, while money may not guarantee continuity of care, disgracefully low wages and arbitrary funding cut-offs ensure a high rate of turnover and low motivation. Most day care workers currently earn less than $4,800 a year, with some still receiving subminimum wage rates.[27] If we are to upgrade the quality and status of child care in America, we will have to fund child care programs and pay child care workers accordingly.

Continuity of care is also undercut by federal funding prescriptions, as in the WIN program, which declare children no longer eligible for care the moment their parent's income exceeds a certain level. The inflexibility of current day care also impedes continuity of care, forcing parents to make multiple arrangements, either for one child at different hours, or for their several children of different ages. This is an enormous burden to an already harried parent, as well as to the child who must be shunted from one arrangement to the next.

The above overview suggests why existing day care arrangements are unpredictable in both quality and continuity. We now turn to examine the major options -- family day care, center care, profit and franchise day care, and work-site day care -- in more depth. We will look at the advantages and disadvantages of each, indicating directions for change when possible. Far from suggesting that one form of day care holds the final solution for all, we conclude that a wide range of options is essential to meet the diverse needs of American families.

1. Family Day Care

Given its location in private homes, family day care has the potential for most closely approximating care by a child's own parents. Family day care is the most frequently used day care. While center care is on the rise, family day care still provides 78% of out-of-home non-relative care for children under 12.[28] But family day care has a shadow side too. A study by Prescott in 1965 found paid family day care to be the most subject of all day care to maternal dissatisfaction.

On the plus side, parents choose family day care because they can usually find it close to home and because it is more likely than group centers to accomodate irregular work hours, children's minor illnesses, and needs for infant and after-school care. Because smaller groups of children are involved, family day care is also less likely to overstimulate or regiment young children than is a large day care center. Finally, family day care is usually less expensive than center care. The lower cost results in part from disgracefully low wage rates. But, even if current wages were upgraded, costs might be kept down by the fact that the family day care parent does not have to pay for additional care for his/her own children and that she is using an existing facility, her home.

These advantages of family day care are impressive, and clearly day care which actually provides these advantages should be fostered. But family day care as it currently exists also has many drawbacks, including insufficient monitoring, isolation, instability, low pay, amd midunderstandings between parent and family day care parent.

First, 98% of family day care is unlicensed and unmonitored by any independent agency.[29] Although licensing procedures do exist for family day care, the very informality that makes family day care attractive also renders it resistant to evaluation: people simply feel reluctant to have evaluators invade their homes.

Second, the family day care parents suffer from the same problems of isolation that other parents do. They have no adults to talk to, no one to relieve them for breaks, crises, or their own illness. Although children placed in family day care may have more peer contacts than they would at home, in urban areas family day care homes tend to be too small for the number of children present, lacking adequate outdoor play space and play equipment.

Third, family day care as it currently exists is highly unstable: one-half of arrangements last only a few months. Observers have been hard-pressed to determine whether this high turnover results primarily from parent or caretaker dissatisfaction. On the one hand, the Keyserling(National Council of Jewish Women) study reported parent dissatisfaction with family day care ranging from a few qualms -- "...so much of the adult's attitude rubs off on the child. If she has a bad day the child gets it....." to full nightmares "I'll never leave my child ....in a home again. My son was severely beaten."[30] On the other hand, the Ruderman study for the Child Welfare League of America found that 33 percent of the women running family day care homes said that they would rather do something else but were not trained for any other job.

Clearly, because the relationship between the parent and the day care parent is so personal, it easily becomes highly charged with feelings of competition, resentment, and disagreements over financial dealings. A family day care parent may take suggestions or criticisms as an affront to the way she's raising her own kids; the working mother may resent the child's attachment to the caretaker. The family day care parent may be jealous of or disapprove of the parent's decision to leave her child for work; the working mother may feel guilty (or suspicious) when leaving her child with a woman who has chosen to be a full-time mother.

Another cause for job dissatisfaction is the disgracefully low pay typical of family day care. Low pay in part reflects, in part determines the tendency toward low qualifications in family day care parents. As Robinson concludes in his international study, the family day care parent may be the least appropriate person in the neighborhood to be caring for children.[31] Other observers, like Arthur Emlen, believe that family day care springs from a wealth of warm, nurturant women who are grateful for the opportunity to work with children.[32] While this is an apt description of many family day care parents, even their capacities for care cannot help but be strained by the isolation of their work and its low pay. Recent testimony by a representative of family day care showed that a typical provider, caring for six children under burdensome working conditions, was left with a total net income of $1,286 per year ($25.72 per week).[33] Another reason for the low pay is that public funding of family day care is almost non-existent. Whatever the cause of low pay, women who are able to get more lucrative work tend to leave family day care, despite a committment to young children, for higher-paying jobs.[34]

Many of the problems of family day care -- the isolation, the low and unsteady income, the poor training of the caretaker -- can be remedied through public support and organization. In several cities, family day care homes are being organized into networks, either by social agencies or day care researchers. Such networks have been tried with great success at Pacific Oaks College, Pasadena, in New York City (The Family Day Care Career Program), and in Philadelphia (Associated Day Care Services). These family day care networks provide toy lending libraries, training, supervision, coordination and third party mediation of client and caregiver grievances. The networks also help parents find homes and provide caretakers with regular salaries. Another new direction is to cluster several family day care homes around a day care center. In this way, the family day parent has access to other helpers and equipment, and parents have access to other day care options if one family day care relationship breaks down.[35]

Family day care is a child care arrangement with great potential for warm and comfortable care. Unsupported, disorganized, it often leads to disgruntled parents, neglected children and exploited caregivers. If time, energy and money can go into forging networks which provide support, the benefits may be preserved and the drawbacks limited.

2. Group Day Care Centers

When people think of extrafamilial care for children, they invariably think of day care centers. Yet there are only a few centers, about 20,000, providing care for at most 10% of the preschool children of working mothers.[36] Furthermore, there are vast differences among day care centers, depending on who controls the center (e.g., profit or non-profit agency) and where it is located (e.g., neighborhood or work-site based). In this section we will first discuss center care in general and then consider some special types of center care.

Day care centers offer a number of advantages over family day care. Of all child care arrangements used by mothers interviewed in the Keyserling study, center care evoked the warmest response, especially because of the educational components involved. Day care centers provide social contacts for both mothers and children. Compared to family day care homes, centers provide continuity of care in a stable environment with several familiar adults. The best center care situations protect continuity of care and the child's need for a close relationship by organizing children into "attachment groupings" with three to five children to one adult, an "emotional anchor," for whom they are a primary responsibility.[37] If a staff member leaves, on a temporary or permanent basis, at least the physical environment remains stable and there are other familiar adults around to take over--the child doesn't have to start all over the way he does when family day care falls through.

Centers are also more likely to be designed with small children in mind--this may sacrifice some of the "real life" aspects of the home, but it is easier to ensure safety, stimulating equipment, and adequate play space, both in and out-of-doors. Although 35 square feet per child is the legal minimum, a center which allots 70 square feet per child distributed over several small rooms is more likely to provide intimacy and flexibility for children's varying schedules as well as enough room to run around in.

Centers are more likely to provide male caregivers, which gives children male as well as female role models. (One of the hypothetical advantages of family day care's more "real life" situation is that there is supposed to often be a father present--in fact, this is rarely the case). Some parents feel this is especially important for children from fatherless homes. Others feel it is good for all children to see men caring for small children and to be able to engage in activities with men on a regular basis.

Finally, center care can allow for active parent participation and control (not just the power to withdraw your child from care, which is more of a defeat than it is a power). It is awkward, if not impossible for a parent to observe a family day care situation, let alone criticize or work with the caregiver on an occasional basis. A good center, however, allows parents to both observe and participate. Parents who have the time and interest can be empowered to make crucial decisions about hiring and program content. Even parents who are not involved can be more secure about their children's care because several adults are always present, so that an informal monitoring is occurring most of the time. Noting these advantages, parents surveyed say that of all child care arrangements, they had the least dissatisfaction with center care (studies by Ruderman, Keyserling, and the Westinghouse Learning Corporation).

Yet why do day care centers have a bad image in the minds of so many, and why do some centers tend to be underenrolled?

One reason for underenrollment, even in centers with high quality care, is frequently their inaccessibility: fees that are too high, eligibility requirements limited to the very poor locations too far from the people who would use them, schedules too inflexible to accomodate people who work part-time, nights or on an irregular basis.

Center care also has the potential for abuse or neglect if it lacks the funds to hire enough good caregivers, or if it is run in such a way to maximize profit and minimize the quality of care. Inadequate center care usually reflects too low ratios of adults to children. Size is also a key variable in determining quality of care. In centers which are too large (over 40 for 3-5 year-olds, over 20 for children under 3), the physical space often teems with noise and children overstimulating small children. "Care giving" comes to mean adherence to rigid schedules just to maintain order; regimentation becomes unavoidable, care-givers become rule-enforcers, distant and cold rather than sensitive and creative.[38]

For-Profit and Franchised Day Care Centers

As we have seen, many people fear public day care centers--they raise the spectre of regimented, depersonalized care. People do not want their children "mass-produced," reared in cold prefabricated settings,according to values they don't share and tended by people who are indifferent. Although this fear has worked against public day care, in fact, by leaving day care to the "market," to entrepreneurs seeking a profit, the 1984 nightmare has often been realized.

Although non-prifit centers are beginning to catch up, the majority of existing center care (60%) still takes place in centers run for profit.

According to the Keyserling study, only 1% of these profit-making centers rate as superior, 15% as good, 35% as fair "in the sense of meeting basic physical needs with very little, if anything, in the way of developmental services," and the rest were poor or worse. In order to make a profit from child care, these centers tend to have large classes, few caretakers per child, little equipment, poor food and poorly trained, disgracefully underpaid and disgruntled staff.

A few years ago, private industry was eyeing the child care market as a potential gold mine. As of mid-1971, 25 day care operations had offered stock to the public and 20 more firms were considered likely to go public over the next few months. Then, the expectations raised in Barrons and the Wall Street Journal were disappointed; fortunes were lost, child care corporations began to fold.Seeing many large corporations pull out of day care, losing hundreds of thousands of dollars, many child care advocates, previously quite concerned about "Kentucky Fried Children," ceased to monitor franchise day care--the scare seemed to be over.

But corporate day care has not disappeared. Living and Learning Schools have been set up all over Massachusetts,Mary Moppet's and Singer Learning Centers continue to expand. These corporations, plus Educare, Alphabetland and other profit-making day care firms have joined to form the National Association for Child Development and Education to lobby for government funding for profit-making day care and against bills which exclude profit day care from public subsidy.[39]

What is wrong with day care for profit? We are not objecting on abstract ideological or moral grounds which say that it is "wrong" to reap a profit from our children. But in the business of child care, making a profit means poor quality service. Franchise centers usually have too many children (typically 60 or 70, up to 100, over 300 in the Singer Learning Center in Cherry Hill, New Jersey). If you want to make a profit, according to Barron's, "the best way to lower overhead is to hold the line on payroll." This means very poor staff-child ratios--as low as the state law allows, (overall ratio of 1-10) and disgracefully low pay ($1.85-3.00 per hour with no benefits, sick days, or pay for lunch when staff meetings are held). The poor pay and exhausting conditions lead to high staff turnover and poor communications among teachers and between teacher and director. The director is in a middle-management position, instructed to keep the teachers in line, minimizing their communication with each other to deter unionization. As we discussed earlier, high staff turnover and lack of communication jeopardize the continuity of care. In addition, educators have long known that teachers treat children very much as they are treated--if teachers are not allowed to make decisions, they allow the children little freedom to make their own decisions and are less likely to engage the children in verbal interchanges.[40] These centers also tend to have few male teachers. (The vice-president of Alphabetland explains this by saying "Well, first you have to make sure he's a real man, if you know what I mean,... But a man can't live on the salary we pay anyway.")[41]

Because their primary goal is to make a profit, franchised day care centers cannot afford to be responsive to the needs of the community or to allow parent control or participation. They will not provide service in poor communities despite the great need for day care.

Work-Site Day Care Centers

Provision of child care at the work place has occurred rarely in America. Unlike European countries, which established creches in factories in the late 19th and early 20th centuries, in the United States before the 1960's, only an occasional Southern textile mill or World War II related industry provided day care at the factory. But in recent years, industry has become more actively involved in day care as they become more aware of the advantages of day care in recruiting personnel, reducing absenteeism and labor turnover. There are now 150-200 employer-supported day care operations in the U.S., including at least 11 run by profit-making companies and over 100 in the non-profit hospital industry, a forerunner in day care. The federal government has also set up day care centers for its employees in the Departments of Labor, Agriculture and HEW. Several unions have also established day care centers at the work place.[42]

Work-site day care may be helpful to the nursing mother, who needs to have her child nearby. It is also more likely than most neighborhood-based centers to accomodate odd-hour shifts. These are crucial advantages for some workers. But most parents find transporting young children to the work site too great a burden, and they are reluctant to separate children from their neighborhood friends. Even for infants and toddlers, it is often more painful to know that the parent is nearby but inaccessible than it is to accept that the parent will be gone for a certain part of the day. As a result of these drawbacks, most urban industrial day care centers have found it necessary to open their centers to the surrounding community to maintain capacity enrollment. In some areas, this can be a boon to a community and can stimulate cooperation between industries and the people who surround them. On balance, however, except in work situations where workers actually express a preference for work-site care, this form of day care does not seem to be the best way to accommodate the needs of families.

Foregoing work-site day care, however, does not mean foregoing industry or labor involvement in child care. Several industries already donate money to the community to establish neighborhood centers (e.g., Pepsico Inc. gave $25,000 to the Day Care Council of Westchester County.) In several cities, industry has contributed seed money grants or loans to potential day care operators. Some industries offer information to their employees, assisting them to find good existing care. Still others (e.g.,the Ford Foundation) provide cash subsidies, or vouchers, to their employees to cover the cost of child care. These activities indicate that industry is taking increasing responsibility for facilitating child care for their workers. Labor demands and government incentives are likely to foster this welcome trend. A 1969 amendment to the Labor-Management Relations Act of 1947 (Taft-Hartley Act) permits employers to contribute to joint labor-management trust funds for the establishment of child care centers for preschool and school-age children.[43]

Goals for a Day Care System

This review of what's wrong with existing day care also suggests some directions for improvement. What is needed is a comprehensive system of day care options which starts with the needs of children and families. In this section we will spell out the key principles which would shape such a system:

I. Continuity of Care
II. Variety and Flexibility
III. Local Control -- Parents' Power and Participation
IV. Universal Entitlement and Voluntary Utilization
V. Priorities
VI. Licensing and Standards

I. Continuity of Care

A day care system which begins with the needs of young children must ensure continuity of care -- the essential need of children during preschool years. For children of this age, loving care is the essential ingredient of all aspects of growth--intellectual as well as physical, emotional and social.*

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* Some studies have shown that this informal, warm caring and not a formal organized cognitive development program relationship is the key to cognitive development as well as social and physical development. Especially impressive is the Skeels study in which retarded institutionalized infants were given to older retardates who cared for them affectionately on a one-to-one basis and the children showed remarkable cognitive and social gains).[44]

In selecting staff and designing programs for day care, the nurturant and social aspects of care should be the primary criterion.

In highlighting "care" over "educational" goals our recommendations contrast sharply with the current wisdom on "good day care". Just as technological criterion have mistakenly become synonymous with quality in most aspects of American culture, various measurable components -- expensive equipment, highly structured cognitive programs, professional credentials --are commonly invoked as the measure of good day care. In fact, these are not essential elements of good care in the preschool years--especially if they are bought at the price of loving care in an informal yet stimulating environment with adults who care for one another as well as for the children.

To ensure continuous and competent care, personnel should be chosen on the basis of personal qualities and specific training without necessarily having professional degrees. The scale of care should be small: high staff-child ratios, small centers or organization by attachment groupings. Salaries should be high enough to attract and keep qualified personnel. Incentives should be devised for volunteer caretakers to encourage long term participation in a given day care setting. Legislative protection for the longevity of programs and funding assistanc is essential.

The consistency which comes from communication between caretakers must also be designed into day care: bilingual staff should be hired when appropriate and time must be provided in the schedule for staff to speak freely to each other and to parents. If narrow-minded cost-efficiency notions are permitted to overrule other considerations, this critical time is often the first to be forfeited. It is called "inefficient manpower utilization", or simple "waste". Yet, nothing is more vital to making a day-care setting humane and nurturant than this vital margin of time for communication. It is the prerequisite for continuity of care.

II. Variety and Flexibility

Good day care must respect the individual needs of children at different ages and parents at different stages of their lives.

The needs of children from birth and age two. At this age, a close, continuous relationship with an adult is essential. Continuity of care and stability of physical surrounding is especially important because, before the age of nine months, a baby cannot know that objects, material or human, have an independent existence, that they continue to exist whether or not he sees them. In these early years, a child's caretaker is, in effect, his link to the external world.[45] While one intense and continuous relationship with an adult may be enough at this age,[*] a child can manage and may benefit from up to five primary caretakers.[46] Too many more caretakers may be a strain on a baby's nervous system, interfering with his efforts to organize the world around him into a coherent, dependable pattern.

From the point of view of the caretaker, relief from the sole care of a child of this age is definitely helpful. Simply meeting the physical demands, not to mention the intellectual and emotional challenge of reading non-verbal cues and providing appropriate stimulation can be as exhausting as it is rewarding. Access to day care can ward off the vicious cycle in which the parent becomes tired and irritable, less responsive and more arbitrary with the child and the child becomes upset and demanding as he becomes insecure about his needs being met.

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[*] It is however, particularly traumatic for the child whose world is divided into "mother" and "strangers" if an emergency requires a prolonged separation from this one primary adult.

Because of the strain, caretakers of this age child need some kind of relief. Most parents would benefit from some kind of extrafamilial child care; family day care mothers need to have substitutes available to them and could benefit from periodic group care situations where they could get some relief from the other adults; and staff in infant care need relief, assistance and reasonably short hours of work.

Because of the importance of an intense bonding relationship to a child at this age, many parents now hard pressed to work might prefer to spend more time at home with their infant. This is a time in a child's life when income supplements, flexible work practices and secure leave policies are especially important options.* Part-time jobs with adequate pay and benefits, child care leaves with pay and reinstatement rights without loss of seniority would be crucial complements to accessible day care. Together they could increase the options and minimize the strains on families with very young children. Although there are great variations among children, child psychologists feel that more than four hours a day away from parents and home is likely to be a strain at this age. Some parents might still choose to leave their child for a full day--in pursuit of a career, out of ideological conviction, or out of awareness of their limitations as caretakers--but no parent should be forced by financial necessity to do this against their judgment.

Although professionals and day care planners world wide are discouraging the development of infant day care centers, many parents still need good infant day care. Many continue to work and find it extremely difficult to find adequate, or high quality care for their children at this especially

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[*] Susan Bucknell will report on these options in her material on work practices.

vulnerable age.

Neglecting infant day care is a dangerous policy when, according to the Bureau of Labor Statistics, the greatest increase in employment of married women is among those with children under 3.[47] The importance of infant day care is also underscored by the significant number of teen-age parents, for whom full-time care of an infant would jeopardize not only their own education and development but that of their children.[48]

Facing this reality, then, what kind of infant care is best? The key factor is a small scale: first, highcaretaker-child ratio (one-to-four, with back up help); second, a low number of total children and adults to minimize overstimulation and rigid structuring; third, a relatively stable, safe, manageable physical space. Family day care homes might be particularly suitable for infants and toddlers but only if there is provision for relief and assistance. However, small centers (up to 12 kids) may ensure greater continuity, safety and appropriate stimulation. As we said earlier, children of this age are best able to develop cognitively and socially not from formal teaching programs or from structured group activity but instead from affectionate, responsive interactions with their caretakers.

The needs of children from two to five years of age. At this age, extrafamiliar care may be actually preferable to all-day home care for many children. With a great need for room to move and a wide range of challenges, with a new found capacity for social relationships and relative ease of separation from parents, children who lack access to other children and caring adults or play space in their home or neighborhood may benefit from the social contacts, the space and the richly varied equipment which come from pooled resources.

At this age there is still a range of tolerance for group settings, some children being easily overwhelmed and overstimulated-- unable to organize too much input, while others enjoy the excitement. In general, the regimentation and intense stimulation common to large centers (over 40) may be difficult for most preschoolers (especially on a full-time basis.)

The needs of school-age children. Older children whose parents are both working need a place to go after school where they can be safe, comfortable and supervised. After a long day in a large group with their time highly structured, they need the informality and intimacy that is best achieved in a neighborhood day care home or small center.

The needs of parents. Parents of young children who don't work outside the home need at least occasional relief from child care. They need opportunities for social contacts, which can be gained either through being freed to seek these contacts on their own, or by participating in the social atmosphere of several adults and children at a child care center.

Parents who are employed obviously have much greater need for day care. For them flexibility in day care is essential. Hours must be flexible enough to cover working hours. Night-time care, and part-time care must be made available to meet their needs. Employed parents also need day care which accomodates children's minor illnesses. The American Academy of Pediatrics advises that "ill children... need not be discharged home as a routine policy; they may be cared for during minor illnesses at the discretion of the parent."[49] Many centers, and many family day care parents refuse to take children with even minor illnesses.

Working parents need care which accomodates all of their children--of all ages. Infants and schoolage children as well as preschoolers need day care. Whenever possible, brothers and sisters should be accomodated together--for the children who benefit from age mix and family closeness and for the convenience of parents.

Most parents want day care close to home.* However, those parents who prefer day care at their workplace should be able to create or demand this option.

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* According to a survey by Low and Spindler, 60 to 80% of all existing arrangements are at or around the home. Rowe and Husby conclude that "available evidence suggests that only five percent of parents would now regularly use child care twenty or more minutes from home." 50

Finally, parents need care--respect and empathy from day care personnel. They need caretakers who speak their language, who can understand and accomodate their particular strains and crises, and who can understand their children in the context of their specific family.

To meet the range of needs which vary according to the child's developmental stage, the parents' work and the nature of the community, local services must take a variety of forms. City families might want to develop a day care center. In a small town or close-knit neighborhood, families might prefer to upgrade and systematize existing family day care. These decisions are best made by the people who need the service--parents and members of the local community.

III Local control -- parents power and parents participation

To foster institutions which are genuinely responsive to the needs of families and which support (and not undermine) the integrity of families, it is crucial that those families have a central role in creating and controlling their institutions. It is not enough for parents to sit on "advisory boards" where they may comment but have no decision making power nor is it enough to have only the all-or-nothing "control" of withdrawing their child if dissatisfied.

What does local control actually mean? It means that the people who care for children--parents and extrafamilial caregivers--rather than far removed professionals, agency bureaucrats or politicians -- determine the nature of that care. To be meaningful, local control must operate at several levels in the decision-making process, involving parents and staff in both policy development and program operation. 1) When state and federal standards and guidelines are being formulated, parents and staff must be included in this process. 2) If councils or boards are established at state and local levels to channel funds and select recipients for funds, parents and staff should make up at least 50% of these councils. (Child development professionals, representatives of relevant agencies and civic leaders would be represented but not have a controlling voice). 3) Most important, the individual program, with mandated parent participation on the governing board, should be genuinely autonomous, empowered to administer its own program. This means that the actual operators of a child care program (and not a centralized agency or council) would control their own budget, hire their own staff, establish their own program goals and design their own curriculum".[51]

What is the potential impact of local control on the lives of children?

First, the anxiety and sense of deprivation of children when away from their parents can be minimized if they feel that their parents are still determining the nature of their lives and care. Second, children's own sense of efficacy is based in large part on their experience of the degree of effectiveness of the crucial adults in their world. Insofar as they perceive their parents' and caregivers' ability to exercise freedom and control over the forces in their environment, they learn the confidence and skills for eventually assuming responsibility and control over their own lives.

Parents' control over day care also facilitates continuity of care and the child's experience of social cohesion. Only when parents have decision making power, control over hiring and firing, can they have staff who respect them, have compassion and are open to communicating with them about the behavior and needs of their children. As we have explained earlier, this promotes consistency and continuity between caretakers. It also allows children to experience the human connection between their caretakers. Rather than being shunted arbitrarily from one stranger to another, the parts of a child's day and life relate to and grow out of one another instead of being disconnected fragments, begun and ended abruptly and impersonally -- and perhaps frighteningly.

Participation in the ongoing operation of day care is an important back-up to effective and responsible decision making and is an important experience in its own right. At the least, parents should have the opportunity to observe what goes on in day care so that they have a basis on which to evaluate or make changes in the quality of care their children receive. At best, parents should be encouraged to take an active role in the center--caring for children, helping with food preparation or clean-up, building or maintaining equipment. Working together with staff and other parents allows the adults to develop relationships which form the basis of an authentic and vital social network which mitigates the isolation and alienation which is so devastating to parents and children alike.

This is a time when parents can actively and concretely influence the style and quality of caretaking. Participation in a day care program can also enrich and change the quality of the home child rearing environment. Current research on the long-term effectiveness of day care in stimulating cognitive development shows that parent involvement in day care is more important to a child's gains than the enriched curriculum of a half or full day preschool.[52]

Significant change is required to make parent participation a meaningful goal and not an empty slogan. First, staff and personnel need to accept that allowing and facilitating parent involvement is part of their job and not perceived as a disruption or detraction from their "real" job.

Second, and vitally important, employers must allow parents the time (without penalty of loss of pay) to participate in the care of their children. This central goal in a child care system cannot be achieved without coordination and support from reforms in work practices.*

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* Susan Bucknell is exploring in depth the reforms of work practices that would enhance family life.

(Clearly some parents will have neither the time nor the interest to participate in day care. It may be more important to them to use their time for relating to their children alone. While parent participation must be facilitated, it should not be mandatory.)

Parents' cooperatives are inexpensive forms of care which insure parents' control and participation. They are, however, limited to the few families who have the leisure time or flexible work situations to free parents to accept major responsibility for staffing day care.

We are aware of some of the short and long term problems of a decentralized system controlled by parents. Families have long been discouraged from taking responsibility for their children, denied control by the many institutions which have gradually taken over so many family functions, denied the time and energy to organize on behalf of their children by work practices which have had little regard for the needs of families. Thus there may be a time lag before some parents who use day care will be willing to get involved and take responsibility; there may be initial or recurrent "sloppiness" as inexperienced parents work out their own institutions rather than fitting into efficient preexisting and uniform models. Some of these problems must be accepted as the price of responsible and democratically organized care; some may be remedied by the establishment of community boards (composed of parents, staff, professionals and committed citizens) to coordinate and enrich individual programs and by fostering the development of a good nation-wide communication network (to some extent already begun by Day Care Magazine, and by the publications of the Day Care and Child Development Council of America) through which people may learn from the experience and expertise of those in other areas of the country and those with different needs.

IV. Universal entitlement and voluntary utilization

Child care should be available and accessible to all families, and only those families, who decide this service would be supportive. Although every effort should be made to acquire financial support from all available sources, universal entitlement and standards can be achieved only when ultimate responsibility for funding rests with the federal government.

To achieve universal entitlement, it is not enough to have funds or services available; they must also be made accessible to people through programs for outreach and dissemination of information. However, unlike our system of education, child care should not be compulsory or free for all. It is up to individual families to decide whether or not and in what form this service would be useful. Sliding scale systems of payment would allow some families to pay part or all of the cost of child care. (Voluntary utilization of day care, will be achieved only when families get the additional income and flexibility in their work schedules to give them a real choice.*)

Only when child care is recognized as a universal right and not a remedial service to deviant families can we have a high quality, non-stigmatized and democratically organized care.

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* Again, this will be covered in Bucknell's work.

V. Priorities

While we have argued that all American families should have access to good child care, it is clear that, in the near future, there will not be enough funds to ensure this.

How should scarce child care resources be allocated? Setting priorities is difficult and painful, both because it excludes many children and families who would benefit from care and because we run the risk of setting up yet another targeted system, which according to the history of children's services, undermines the quality of care for the children who do receive care. Although we can partially mitigate these dangers through the kinds of priorities set and the system by which they are enforced, we cannot avoid them altogether as long as funds are scarce.

Our policy criterion is that first priority should go to those families and children who would suffer the greatest stress, disintegration or harm from the lack of available child care. That is, children with two working parents, children with a single parent, and children who are disabled or whose parents are disabled need daycare most. Unlike the policymakers in the 1960's who looked at day care as a form of "compensatory education" for poor children, we think day care need is less related to income than to the working (or student) status of parents. While poor families need income redistribution, they may or may not need day care.

Priorities should also be enforced to foster the efficient use of resources. Quotas should not be set, places should not be reserved and kept empty until a "priority" child can fill it. Individual programs should administer their own intake process, mandated by funding guidelines to take applicants in order of priority. Only the person doing intake can have enough information to judge between one priority child and another. However, if a space has been adequately advertised in the community, and only low-priority applicants apply, then the space should go to the low priority applicant. In this way, enrollment can be kept at capacity, and the stigma of programs targeted exclusively at poor children partially alleviated.

In allowing resources for programs, at the federal policy level, priorities should not distinguish between the three age-groups. Infants, preschoolers and school-age children all have child care needs, and local communities can best determine the appropriate mix.[53]

VI. Standards

The entire question of child care regulation -- who should set standards, how detailed they should be, how they should be enforced -- is one of the most complicated issues in child care policy. Licensing is essential to provide standards and guidelines for safety and for quality care which will reflect the principles which have been ennunciated above. Licensing is an effective way to ensure universal quality of care at least at a minimal level, and of informing parents which programs meet these standards. We are, however, highly critical of rigid and arbitrary enforcement of licensing codes and of the development of guidelines which completely disregard existing resources.

Most current efforts to license child care arrangements are an exercise in futility. Despite state laws requiring licensing, less than 2% of family day care homes are licensed. While 90% of day care centers are licensed, this figure may not indicate the number of parent-run c-operatives that remain underground. Carefully staying unknown to hide their illegal status, these facilities are inaccessible to many who might use them, are ineligible for government funds, lack the visibility that is the best guarantor of safety and are apt to have an unstable existence.

If the licensing standards themselves were rational or if they were uniformly enforced, the present approach to licensing might still have some justification. But in fact there are often three or four different licensing codes (fire, public health, zoning, etc.), each administered by a separate agency, with no one code having standards specifically designed to protect children in a variety of extrafamilial care settings. Frequently, a center is denied a license because its kitchen does not conform to restaurant standards, although staff and parents consider the facilities quite adequate for children's lunch needs. Some centers must delay opening for months while they rectify rather trivial problems while other centers -- usually large private or publicly funded centers -- have the money to comply promptly. Clearly these inappropriate codes discourage the kind of small, neighborhood-based, homelike facilities we consider most suitable for out-of-home care for young children.

How best to ensure children's safety and foster quality care without discouraging the exapnsion of a needed service or sending many facilities underground? Most licensing experts agree that the present Federal Interagency Child Care Requirements are too vague, and that it is a poor idea to attempt to write many specific standards into federal law -- standards that need to be regularly reexamined and regularly changed. Instead, as Gwen Morgan, long active in Massachusetts day care planning and administration suggests, "one should write into the statute the process by which standards will be formed." That process should include input from a wide variety of sources -- parents, staff, researchers, and regulatory staff. On a state and local level, licensing codes need to be consolidated into a single code, specifically tailored to child care, administered by one licensing staff and one agency, ideally the state-level family support agency described earlier in this report (see p.). Most important, to help prevent delays in opening facilities, whatever laws are enacted should be changed from enabling legislation -- or laws which require a center to have a license before opening -- to directing legislation -- laws which help a center comply.

In the end, however, child care policy should recognize the limitations of standard-setting, namely the difficulties in enforcing them. As Mary Rowe, an MIT economist who has studied child care costs, notes, "it would cost more to monitor facilities extensively than it costs to operate them." For this reason, we favor establishing an alternative route to full licensure for child care providers -- registration. Registration would not make any claims of guaranteeing the quality of care, although laws would exist to appeal for infractions. Registration would simply bring facilities, particularly family day care homes, above ground, requiring that they be visited at least once by a public agency and be open to parents at all times. Incentives for registration would include not only eligibility for government funds, but also listing in community referral services, access to group insurance plans, and in-service training and credentialling.

Politics of Day Care: Prospects and Mechanisms for Implementation

Given these principles for voluntary, yet universally available child care, what are the prospects for legislating them? Perhaps not so bleak as one might gather from the existing patchwork of child care laws and services.

In 1971 the United States came close to adopting comprehensive child care legislation. Although President Nixon vetoed it, Congress passed the Comprehensive Child Development Act with bipartisan support (Senate--63 to 17, House--210 to 186). This bill included a broader range of economic groups than is currently reached by any federally subsidized day care. While 65% of funds would have been reserved for the poor and otherwise disadvantaged, the remaining 35% would have been available to middle-income families who would pay on a sliding fee basis. Furthermore, the bill extended the definition of "poor" to include all those families below the Bureau of Labor Statistics lower living standard ($6,960 per year) rather than the federal poverty standard ($4,320 per year). The bill also aimed to maximize local control and parent participation. Federal grants would have been delivered directly to "prime sponsors," the closest level of government to the families served that could present an acceptable plan. Despite federal or centralized funding, day care would have been administered locally by Child Development Councils, of whom half of the members were to be parents and one-third economically disadvantaged parents.

President Nixon vetoed the bill on the grounds of "family-weakening implications." He said the legislation "would commit the vast moral authority of the national government to the side of communal approaches to child-rearing over against the family-centered approach." Strangely, administration witnesses never mentioned this argument in two years of Congressional hearings on the bill. Nor, as the bill's Senate Republican Policy Committee supporters point out, did the Administration fear day care's family-weakening implications for the 450,000 welfare children to be covered under the Family Assistance Program.

Whatever the underlying reasons for President Nixon's veto--to appease conservatives who disliked his China policy, to focus the spotlight on his Family Assistance Program--, the same bill would probably have a more difficult time reaching the Oval Office today. One new obstacle, of course, is the state of the economy and President Ford's call for a one-year moratorium on new federal spending programs. Another factor is the reduced fervor for early childhood education. Poor test results crumbled the myth that early childhood education vastly improves lasting cognitive performance; Head Start children performed no better on tests than did those who did not attend. Even the "day care to get them off welfare" argument has been undercut by Gilbert Steiner's analysis of the WIN program in Washington D.C., which suggests that good day care costs about as much as welfare assistance.

Nevertheless, as discussed in the history section, perhaps the rationale of public day care to fight poverty was never very strong. The strongest rationale for expanding day care is to meet the changing needs of the American family. We will not attempt here to assess the prospects for 1975 passage of the Mondale-Brademas "Child and Family Services Act," the current version of the 1971 bill that was vetoed. It is conceivable that the election of a more liberal Congress, the need for expanding public employment to curb the depressed economy, and the concern that moderate-income families need help, could work in favor of a comprehensive child care bill. It is also possible that AFT President Albert Shanker's proposal to put day care under public school control could split the coalition of education, labor, civil rights, day care and community groups that so successfully lobbied for the 1971 bill's passage.

This last point leads us to a discussion of the underlying political issues, issues that were never really resolved in the 1971 debate and perhaps must be if this nation is to have comprehensive child care legislation. These underlying issues include debates over administrative control of day care--should it be invested in education, social welfare, or specifically child-oriented agencies; over delivery of funds-- should they go to states or local communities, through categorical or alternative grants; over eligibility --how many of the "unpoor" should be included, and should profit-making centers receive subsidies; over slow vs. rapid expansion; and last, but far from least, over how much day care should cost.

1. Debate over Administrative Control of Day Care.

There is some reason to distrust all three types of agencies--education, social welfare, and specifically child-oriented--vying for control of day care: "Each is protecting its own bailiwick," as Jule Sugarman puts it. Their chief "concern is jobs, not the welfare of children and families," says William Pierce of the Child Welfare League.

Thus, we favor not vesting control of day care in any of the above agencies. On the federal administrative level, a central office specifically focussed on child and family services would decide which local government level, or "prime sponsor," to fund. But on the local level, rather than electing a social welfare, pedagogical or child psychologial approach, the law would simply call for a "community" approach--allowing local boards of parents to determine what kind of day care best suits their needs. Of course, the law should require that local boards inlcude educators, social workers, psychologists, etc.

The conflict between the pedagogical and social welfare approach runs through the entire history of day care. Both approaches have had their shortcomings. The well meaning but often paternalistic charity ladies and subsequently the social workers who ran day nurseries shared a tendency to pathologize and patronize the day care recipients. Yet, they did have the merit of focussing on the "whole" child-- by considering his physical (as opposed to strictly educational) needs, by trying to understand and relate well to the child's family, by responding to the family's needs for infant and after-school care. In fact, the social welfare approach, which continues to dominate public day care today, may err on the side of being too parent- as opposed to child-centered, seeing day care primarily as an income maintenance scheme, a service to facilitate the poor mother's employment.

Professional educators, first to kindergartens and then to nursery schools, brought a more specialized knowledge of how young children learn. But the teachers tended to limit their care strictly to preschool children, frequently to 3- and 4- year-olds. Thus, other family needs--for infant day care and after-school care--got lost in the shuffle. Professional educators also tended to regard young children's physical needs--ranging from toilet-training to T.L.C.--as subordinate, unfortunate interferences with the teacher's real task, which was "education." Education was thus defined in narrowly cognitive terms, and the notion that day care should serve as a family support lost out.

Although child-oriented agencies may run the least danger of imposing professional expectations on small children, these agencies, too, can forget the real needs of children and families. By insisting on developmental as opposed to custodial day care, children's advocates sometimes forget that many children now lack even the most minimal care -- they are growing up in unsafe surroundings, their "custodians" asleep, under-age, or totally absent. Furthermore, the terms "developmental" and "custodial" may themselves be misleading. "Good programs for children," according to Gwen Morgan, long active in Massachusetts day care administration and planning, "are those which have a stable staff, paid well enough so that they do not leave and with a low enough ratio of children to staff so that individual attention is possible. If such conditions exist, it becomes an ideological exercise whether the staff conceive of what they are doing as custodial or developmental."

All this debate over which agency will administer day care takes on new importance in the light of American Federation of Teachers President Albert Shanker's proposal that the public schools run day care. At a time when school populations are declining, schools closing, and the number of teacher jobs contracting, Shanker says that day care "is a job for the public schools." Indeed, he has vowed to oppose any child care legislation which does not give the public schools control of day care.

In place of the proposed Mondale-Brademas Child and Family Service Act provisions, which would give community agencies priority as prime sponsors, Shanker says "public schools should be the presumed prime sponsors for all programs, particularly those serving children 2 1/2 to 3 years of age." In place of proposed parent control, Shanker wants school boards to control day care. Finally, like the professional educators who preceded him in day care, Shanker wants to separate early childhood education from the family services context. "'Family' should be dropped from the bill's title," he says. Day care should simply aim to improve children's cognitive skills, not to ease the strains on working and/or isolated families.

In addition to separating day care from the family context, public school day care programs would be vulnerable to all the perils of centralization -- inflexibility and uniformity -- that day care's critics most fear. In Philadelphia, where 4,900 children are enrolled in school-staffed "Get Set" day care centers, efforts to promote parent and community participation seem to be losing out to the teachers' professional goals.[54,55]

Teachers at some of the centers visited said they would like guards at the door, "a more professional atmosphere, more protection and stability." Union rules require visitors to obtain passes from regional union headquarters. Although parents are supposed to have open access to the centers, the atmosphere may inadvertently make parents feel unwelcome. Less than half of the parents attend monthly meetings, according to one Get Set field supervisor. Commenting on parent involvement, a Get Set teacher said, "The only problem we really have is getting parents out for meetings. Other than that, parents will do just about anything you want them to do."

The Philadelphia Get Set program may also be in danger of weakening one of its major attributes -- a strong paraprofessional component. When teachers direct day care centers, they tend to confine their roles to so-called educational tasks -- such as reading, readiness--delegating aides to perform what they view as "dirty work"--serving snacks, fetching supplies, and cleaning up spills. A recent teacher union contract is likely to undermine the role of paraprofessionals--the union won a 50% raise for teachers, less than 9% for paraprofessionals. "This just fosters bad morale," says Rosemary Mazzatenta, assistant director of Get Set.

The Philadelphia experience also offers little evidence that school-trained personnel have any particular skill in caring for pre-school children. The centers we visited, strikingly similar in program operation and feel, seemed more modeled after teacher-centered school classrooms than the intimacy of a home. Some of the rooms seemed barren, with many toys out of children's easy reach, and too much emphasis put on the orderly assembling of children in their seats for snacktime. In one classroom the teacher sat behind her desk for the duration of our visit. Although aides were stationed near the eight children in the room at that time, there was no apparent interaction. One child was looking at a picture book; the other seven were doing nothing at all.

These observations are not intended to counter all school involvement in early child care programs, but rather to underline the undesirability of exclusive school control. It may be appropriate for schools to offer preschool cognitive programs and educational programs for children with special needs. We would even argue that, in communities where no other group is willing or interested in administering day care, the schools should assume this responsibility. But to give schools the primary role would simply fail to meet many of the non-educational needs of families and children. Schools tend "to see families as adapting to their hours and schedules for vacations, rather than to see themselves as supporting family needs."[56] Thus, in those communities where schools do take primary responsibility for child care programs, it is crucial that legislation assure that parents and non-professional staff participate in the decision-making, that day care schedules accomodate family needs, and that staff be selected on the basis of their awareness of the special needs of young children.

2. Debate Over Delivery of Funds

The debate over delivery of funds relates closely to the debate over control of day care. On both issues we favor resolutions that will maximize parent and local community power. Nevertheless, just as we would not want to exclude educators from day care, we would not want to preclude a state role. States definitely have a role in licensing local day care facilities, in that sense exercising some control over who's eligible to receive funds. Recently, some states have taken the initiative in coordinating day care efforts, suggesting that such states (particularly small states) might well become "prime sponsors" or fund deliverers. But other states continue to take little interest in day care. And if states were given the exclusive role in funding local day care facilities, there might be a temptation to deliver the entire day care operation to a profitmaking day care chain, thus sacrificing all possibilities for parent participation and control.*

Although the 1971 Comprehensive Child Development Act would have given local government units first priority to become prime sponsors, recent legislation gives more power to the states. Title XX of the new Social Services Amendments gives states discretion to determine eligibility and to decide which agencies to fund. By July 1, 1975, each state must submit a comprehensive plan for social services, including day care. Based on those state plans, we may be in a better position to recommend what future role the states should have in day care.

In addition to state vs. local functions, the debate over delivery of funds for day care raises the question of categorical vs. alternative grants. Framers of the 1971 bill elected the categorical approach on the grounds that it was the best way, according to Marian Wright Edelman to assure "program quality, comprehensive services, decisive parent involvement, community control, and socioeconomic diversity".

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*This debate over state vs. local fund delivery dates back to the Lanham Act Era during World War II. At that time the Federal Works Agency made direct grants to local communities for day care. Opponents argued that this practice offered no incentive for states to contribute to the program, that the FWA had not set up an evaluative mechanism, and that the agencies best prepared to administer child care had been by-passed. Congress upheld the FWA and local fund delivery after AlphaKappa Alpha, an organization of Negro women, charged the other agencies and states with a history of discrimination.

But advocates of alternative approaches -- such as revenue sharing, vouchers, or income tax deductions -- argue that a categorical approach is bound to foster an unwieldy bureaucracy that will swallow up parent control.

We think revenue sharing would do little more than consolidate current federal programs for children. By not containing any guarantee for additional funding it would place all children's services, including day care, in competition for extremely limited funds. Day care vouchers represent a more persuasive alternative. They would give parents "free choice". But if legislation does nothing to increase the quality or supply of day care, how much is free choice worth? As the Brookings Institute concludes, vouchers must be accompanied by federal funds for day care construction and personnel training as well as measures to insure quality control. Once all these extras are added in, the primary attraction of vouchers -- their simplicity -- begins to be cancelled out. The same objections apply to tax deductions or rebates as a primary means of financing day care -- by themselves, such measures do nothing to address the issues of day care supply, quality, and parent control.

3. Debate Over Eligibility

In 1971, no Congressional supporters of the Comprehensive Child Development Act took issue with the so-called 65/35 split i.e., that 65% of funds would go to disadvantaged children, the remaining 35% to help finance day care for middle-income children. Yet the Nixon administration seemed to take the position that public day care was fine for the children of welfare mothers, but a risky proposition for middle-income families. "We shouldn't unleash day care on the middle-class, Moynihan commented to the Senate Republican Policy Committee, "until we study it".

The Ad Hoc Coalition on Child Development, the group which drafted the 1971 bill's major provisions and lobbied for its passage, favored including the middle class partly for strategical reasons, i.e., to increase the prospects for sufficient funding and quality programs. Congressman Chisholm argued for a socioeconomic mix on the grounds that the "poor and the working class have the same needs and the same problems", a view echoed in the AFL-CIO's endorsement of the bill. Others supported middle-income eligibility on the grounds that socioeconomic mixing of children promotes school achievement.

The recently enacted Title XX of the Social Services Amendments allows for middle-income eligibility for day care funds. This law permits states to include families whose incomes do not exceed 115 percent of the median income for a family of four in that state -- the national median income is $13,710. Although 50% of Social Services funds must be used for individuals receiving or eligible for AFDC, SSI, or Medicaid, Title XX removes the old requirement that recipients must be past, present or potential welfare recipient.

Although the legal precedent for middle-income eligibility is now established, the issue is likely to arise again. For the real question is, given the inevitable insufficiency of funds, is it fair to subsidize middle-income day care before all of the most disadvantaged have been served? We think, given the policy peril of the past -- that programs limited to the poor tend to become poor programs --, that the future of quality day care depends upon middle-class inclusion.

A separate question of eligibility concerns profit-making day care centers. In principle, it would seem that federal money should not be used to subsidize profit-making services. On the other hand, given the fact that the majority of children now enrolled in day care centers are in for-profit facilities, it may seem unfair to exclude such centers from public aid.

The 1971 bill did not exclude profit-making day care. Since then, for-profit centers have organized their own lobby to make sure they are not excluded in the future. Based on this political reality, as well as the questions of fairness involved, it seems that the best way to exclude poor-quality profit-making centers is to legislate standards of quality and parent control that they can't meet.

4. Debate Over Slow vs. Rapid Expansion

To some extent this issue is a straw man: there are no serious legislative proposals to provide universal day care overnight. The 1971 bill would have provided $2 billion in the first year of full program operation; the more recent Mondale-Brademus bill is more conservative, limiting the first two years of funding to training and planning, and calling for $1 billion for the first full year of program operation.

Most day care advocates simply feel that "the constituency for quality is stronger than the constituency for availability" (Nelson). Given the fact that we already have a shortage of day care workers trained in child development, Jule Sugarman concludes we "cannot go much beyond $250 million to $300 million a year in growth for early childhood and day care programs...."

We agree that quality day care must take precedence over broad coverage. At the same time, we think every effort should be made to take advantage of existing resources -- by upgrading current family day care arrangements, by linking parents with appropriate available facilities, by effectively using personnel who meet the personal, if not the professional, qualifications of good day care workers.

5. Debate Over Costs

As on the question of long-term day care needs, one can only speculate about the ultimate cost of making day care available to every family who wants it. There is no way to measure how many families would use it, or whether the primary use would be for relatively inexpensive after-school care or for more costly preschool care. Furthermore, costs vary from region to region; while acceptable fulltime day care may cost $2800 a year in New York City, the same quality care might cost less than a $1,000 in a small Southern city.

Nevertheless, it is clear that a comprehensive day care system would be far from cheap. The 1970 White House Conference on Children estimated that it would take at least $10 billion to begin to make day care universally available. The Brookings Institute estimates yearly costs of between $8 and $11 billion for a near-universally available voucher plan for day care (maximum voucher $1,750 for children under 6, $900 for those under 12; income eligibility limit set at $15,000). Although income maintenance legislation, by enabling some parents to choose to stay at home, might reduce these costs, unionization of day care workers--an eventual likelihood -- would substantially raise them.

Rather than in indulging in long-term speculations on cost, perhaps it would be more useful to ask how much money the federal government would have to appropriate to begin to make an impact, thereby increasing the popular demand and political willingness to pay for universally available day care.

* * * * *

We have argued that the changes in the American family -- the increases in single-parent families, in the number of working mothers, and in isolated child-rearing -- have created a need for day care as a family support. We recognize, however, that the current American attitude toward the family "is akin to what happens when a man is hit by a truck -- no one dares to touch him for fear of hurting him more. Some pray -- and all resolve not to get involved."[57] Hopefully policymakers will begin to see that a sound federal day care policy would strengthen the family, not further weaken it.

1. Westinghouse Learning Corporation and Westat Research, Inc: Day Care Survey, 1970. Prepared for the Office of Economic Opportunity, 1971; and Mary Dublin Keyserling: Windows on Day Care. National Council of Jewish Women, 1972.

2. Keyserling, ibid.

3. Westinghouse, op. cit.

4. Interview with Mary R. Rowe, "Can the Economy Afford Child Care -- Or -- Can the Economy Afford Not to Have Child Care?" Voice for Children, Vol. 7, #11, December, 1974.

5. Ibid.

6. Urie Bronfenbrenner, "Who Cares for America's Children?" Paper presented for a symposium on "The Family -- Can It Be Saved?" sponsored by St. Christopher's Hospital for Children, Boston Children's Hospital Medical Center, and the Johnson & Johnson Institute for Pediatric Service, Philadelphia, April 25, 1975, p. 4.

7. Bronfenbrenner, "The Origins of Alienation."

8. Bronfenbrenner, "Who Cares for America's Children?" p. 5.

9. David Gil: Violence Against Children. Cambridge: Harvard University Press, 1970.

10. Studies in Vermont, California and Illinois as cited in Child Care in Massachusetts: The Public Responsibility, Richard D. Rowe, Director, Massachusetts Early Education Project, February, 1972, pp. 3-21 and 3-22.

11. Margaret Steinfels: Who's Minding the Children? New York: Simon and Schuster, 1973, p. 50.

12. Mary Howell, "Employed Mothers and Their Families -- I," Pediatrics, Vol. 52, No. 2, August, 1973, pp. 253-254.

13. Opportunities for Women in Higher Education, A Report and Recommendation by the Carnegie Commission on Higher Education, McGraw-Hill Book Co., September, 1973, p. 31.

14. However, two surveys, one on demand by UNCO, Inc., and another on supply by ABT Associates in Cambridge, Mass., are in process.

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16. Arthur Emlen, "Slogans, Slots and Slander: The Myth of Day Care Need." Amer. J. Orthopsychiat., Vol. 43, p. 29, January, 1974.

17. Westinghouse, op. cit.

18. Beatrice D. Carman, Director, Office of Child Development, State of North Carolina, Department of Human Resources, personal communication, November, 1974.

19. Patricia J. Monroe, Day Care consultant, State of Alaska, Department of Health and Social Services, Division of Family and Children Services, Personal Communication, November, 1974.

20. California Department of Education estimates, 1974, as reported by H. Glenn Davis, associate superintendent of Public Instruction.

20a. Senate Finance Committee Report on Child Care, 1974, p. 70.

21. Stevanne Auerback: "Federally Sponsored Child Care", in Child Care -- Who Cares?", Pamela Roby, editor. New York: Basic Books, Inc., 1973.

22. David Gordon, "Analysis of Major Federal Child Care Programs", Staff working paper, California Department of Education, May, 1974.

23. Mary P. Rowe and Ralph D. Husby, "Economics of Child Care: Costs, Needs and Issues" in Child Care -- Who Cares?

24. Steinfels, op. cit.

25. Vicki Breitbart, The Day Care Book: The Why, What, and How of Community Day Care, New York: Alfred A. Knopf, 1974.

26. This history section is based on ideas and facts from:

    Greta G. Fein and Alison Clarke-Stewart, Day Care in Context, New York: John Wiley and Sons, 1973.

    Virginia Kerr, "One Step Forward -- Two Steps Back: Child Care's Long American History" In Child Care-- Who Cares: Foreign and Domestic Infant and Early Childhood Development Policies ed. by Pamela Roby, New York: Basic Books, 1973.

    Sheila M. Rothman, "Other People's Children: The Day Care Experience in America" In the Public Interest, Number 30, Winter, 1973.

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    Unpublished paper on day care history, by Shelley Kessler, 1973.

27. Mary Potter Rowe and Ralph D. Husby, "Economics of Child Care: Costs, Needs, and Issues" in Roby, op. cit.

28. June Solnit Sale, "Family Day Care: One Alternative in the Delivery of Developmental Services in Early Childhood" In Amer. J. Orthopsychiat., 43 (1) January, 1973.

29. Gwen Morgan, Alternatives for Regulation of Family Day Care Homes for Children, Washington, Day Care and Child Development Council of America, Inc., 1974.

30. Keyserling, op. cit.

31. Halbert B. Robinson "Early Cognitive Development: Implications for the Design of Children's Environments," position paper for the Meeting of Experts on Psychological Development of Children and Implications for the Educational Process, United Nations Educational, Scientific and Cultural Organization.

32. Arthur C. Emlen, op. cit.

33. Testimony of Patricia Cox to the Joint Hearing of the Senate Sub-Committee on Children and Youth, the Senate Subcommittee on Employment, Poverty and Migratory Labor and the House Select Subcommittee on Education, March, 1975.

34. On Family Day Care Networks, see Sale, op. cit., or contact Family Day Care Career Program, 349 Broadway, N.Y., N.Y. for report, "I'm a New Woman Now" by Erline Willis.

35. Some of these drawbacks of family day care have been spelled out in Minta M. Saunders and Mary Elizabeth Keister, Family Day Care: Some Observations, Washington: Day Care and Child Development Council

36. Westinghouse, op. cit. pp. 175, 178-80.

37. Peggy Daly Pizzo, The Infant Day Care Debate: Not Whether but How, Washington Day Care and Child Development Council of America, p. 11.

38. Elizabeth Prescott, "The Large Day Care Center as a Child-Rearing Environment" in Voice for Children, Vol. 2., No. 5, May, 1970.

39. Georgia Sassen, Cookie Avrin and the Corporation and Child Care Research Project, "Corporate Child Care", in The Second Wave, Vol. 3, No. 3., 1974.

40. Personal communication with Joan Costello, Yale Child Study Center, New Haven, Connecticut.

41. "Corporate", op. cit.

42. Day Care Services: Industry's Involvement, Bulletin 296 of Women's Bureau Workplace Standards Administration, U. S. Department of Labor.

43. Ibid.

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50. Husby and Rowe , op. cit., p. 115.

51. Joan M.Bergstrom and Gwen Morgan, Issues in the Design of a Delivery System for Day Care and Child Development Services to Children and Their Families, Day Care and Child Development Council of America, May, 1975.

52. UrieBronfenbrenner, A Report on Comparative Evaluation of Pre-School Programs, Vol. II: Is Early Intervention Effective, Department of HEW Publications, OHD 74-25.

53. See Bergstrom and Morgan, op. cit.

54. Personal observations by Richard H. Delone and Susan Hunsinger, Carnegie Council on Children staff members, of several Philadelphia "Get Set" centers, June, 1975.

55. Although Philadelphoa school system also subcontracts day care to local community agencies our comments pertain only to those directly staffed by the schools, however, even the subcontracted programs encounter some difficulties with school administration. "The greatest difficult of working with the school system, " says Rachel Hill, who directs the subcontracting program, "is the complex mechanism for getting things done. .....Autonomy is hard to explain to school officials. Some think the school should control the agencies more."

56. Bergstrom and Morgan, op. cit.

57. Comment from participant at the 1960 White House Conference on Youth.

Epilepsy
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STATEMENT

SUBMITTED TO

THE SUBCOMMITTEE ON CHILDREN AND YOUTH

OF

THE U.S. SENATE COMMITTEE ON LABOR AND PUBLIC WELFARE

SEPTEMBER 5, 1975

BY

THE EPILEPSY FOUNDATION OF AMERICA

RELEVANT TO:

S. 626--Child and Family Services Act of 1975

Epilepsy—The more you know about it, the more you want to help.

The Epilepsy Foundation of America, as national spokesman and advocate for an estimated four million Americans afflicted with epilepsy, appreciates this opportunity to present its views on the Child and Family Services Bill, being considered by the Subcommittee on Children and Youth.

While epilepsy affects people of all ages, it is particularly a disorder of childhood--and presents tremendous social and psychological problems to the affected child, as well as the family. The neurological dysfunction known as epilepsy remains as one of the most tragically misunderstood handicapping conditions in this supposedly enlightened twentieth century. Persons with epilepsy, children and adults, are still socially and legally ostracized to an appalling degree. Public schools still often refuse admittance to children with epilepsy on the grounds that a seizure might prove too shocking to the other children in the school.

There have been great advances in research and campaigns of public education which have resulted in a genreal change of attitude toward these disorders. But, as the noted neurologist, Dr. William G. Lennox, has said, "Epilepsy still remains in the dark closet of public prejudice and ignorance." Medical science has made great strides in the use of drugs that effectively control many seizures in persons with epilepsy. As yet, however, nothing science has achieved has been able to crack the barrier of public ignorance and eliminate the stigma attached to epilepsy. As a result, persons with epilepsy, and particularly children, face numerous crippling emotional problems which often leave them unprepared to function normally in our society.

The Epilepsy Foundation of Aemrica is firmly committed to the position that comprehensive services be made available to those children and their family members in order that they may achieve their maximum potential and live a full and satisfying life with dignity.

Distinguished members of the Foundation's Professional Advisory Board concur with the philosophy of this Act, that will provide a variety of needed child and family services, placing priority focus on those preschool children and families with the greatest economic, health and human needs. We particularly applaud the sections of the Bill which will encourage the active participation of parent and community service organizations working together for the benefit of the child.

The Foundation's comments that follow are addressed to strengthening and expanding specific language of S. 626--to make the legislation more responsive to the special needs of children and family members affected by epilepsy and other developmental disabilities. To this end, the proposed amendments to the Act identify handicapped children as developmentally disabled, using the definition contained in the Developmental Disabilities Act of 1973.

Respectfully Submitted,

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(Child and Family Services Bill-S.626)

Page 2, Line 15

children, and there are many children with handicapping disabilities requiring special services whose families lack sufficient resources who do not receive adequate health, nutritional, educational and other services;

Page 2, Line 20

parents, community, private agencies, and relevant non-profit voluntary service agencies, and State and local government with appropriate supportive assistance from the Federal Government.

Page 3, Line 2

school children and families with the greatest economic, health, or human needs...

Page 5, Line 22

Mental Health, the National Institutes of Neurological and Communicative Disorders and Stroke, the National Institute of Child Health and Human Development...

Page 5, Line 24

the Department of Labor, and other appropriate agencies representing the public and private sectors, shall meet on a regular basis,...

Page 7, Line 1

including educational agencies and voluntary health service agencies) and to other public and private nonprofit agencies ...

Page 7, Line 23

parents, with special counseling needs due to chronic disabling conditions within their families, other family members functioning in the capacity of parents, youth, ...

Page 8, Line 12

incidence of mental retardation, cerebral palsy, epilepsy, autism and other handicapping conditions,

Page 8, Line 13

conditions, through providion for the early screening, diagnosis, and evaluation (including maternal care, developmental screening, home care, infant and preschool stimulation programs, and parent counseling and training) of developmentally disabled infants and preschool children, particularly those with multiple handicaps and (ii) postpartum and other. . .

Page 9, Line 2

visual, hearing, speech, medical, including neurological, dental, . . ,

Page 9, Line 7

. . . physical, neurological, mental, and emotional handicaps . . .

Page 14, Line 23

area of other public or private nonprofit agencies operating programs . . .

Page 20, Line 5

economically disadvantaged, developmentally disabled, minority group, . . .

Page 20, Line 8

. . . against minority group children, developmentally disabled, or economically disadvantaged children, . . .

Page 20, Line 12

which will equitably serve minority group children, developmentally disabled, and economically disadvantaged children.

Page 22, Line 11

of private agencies and voluntary non-profit organizations concerned with or operating programs relating to child and family services and at least one person who is particularly skilled by virtue of training or experience in child and family services;

Page 25, Line 7

each minority group including handicapping conditions cited in this act and significant segment of the economically disadvantaged ...

Page 27, Line 24

private agencies, institutions, or voluntary nonprofit organizations, ...

Page 28, Line 7

applications submitted by public and private voluntary nonprofit agencies ...

Page 31, Line 5

to a qualified public or private agency or voluntary nonprofit organization, ...

Page 31, Line 16

and Family Service Council by a public or private agency or voluntary nonprofit organization ...

Page 33, Line 23

parents of children served by this Act, older children, students, older persons ...

Page 34, Line 21

agency or voluntary nonprofit organization seeking funds under section 104(d) shall be submitted directly to the Secretary ...

Page 36, Line 9

assisting public and private agencies and voluntary nonprofit organizations in the acquisition or improvement of facilities ...

Page 51, Line 20

to improve the early diagnosis and treatment of diseases, neurological disorders, handicapping conditions, and learning disabilities of preschool children.

Page 52, Line 19

(including other Government agencies), voluntary nonprofit organizations, institutions, and individuals.

Page 55, Line 8

health, and other services described in this Act and needed to provide the opportunity for children to attain their full potential, including services to other family members;

Page 55, Line 20

"handicapped children" includes mentally retarded, cerebral palsied, epileptic, autistic, hard of hearing, deaf, speech impaired, visually handicapped ...

DAY CARE CRISIS COUNCIL of the chicago area

201 N. WELLS STREET • ROOM 842 • CHICAGO, ILLINOIS 60606 • (312) 332-1722, 1723

AUGUST 29, 1975

STATEMENT FOR JOINT CONGRESSIONAL HEARING - CHILD & FAMILY SERVICES BILLS - 1975

PRESENTED BY SYLVIA COTTON, PRESIDENT

SINCE ITS FORMATION JUST FIVE YEARS AGO, THE CRISIS COUNCIL HAS PROVIDED THE ONLY CITY-WIDE FORUM THAT BRINGS TOGETHER IN A JOINT COMMUNITY ACTION ORIENTED EFFORT THE FULL SPECTRUM OF INDIVIDUALS AND ORGANIZATIONS WHO ARE INVOLVED IN UPGRADING AND EXPANDING DAY CARE SERVICES FOR ALL CHILDREN IN THE CHICAGO AREA WHO NEED THEM. MEMBERS OF THE COUNCIL INCLUDE PARENTS OF CHILDREN IN DAY CARE; DAY CARE CENTERS, INCLUDING NOT-FOR-PROFIT, FOR PROFIT AND STATE SUBSIDIZED; PROFESSIONAL AND LAY CHILD CARE ADVOCATES; SOCIAL SERVICE AGENCIES WHO WORK WITH CHILDREN AND FAMILIES, SUCH AS LUTHERAN WELFARE SERVICES, U.C.C.S., CATHOLIC CHARITIES, THE CHICAGO FEDERATION OF SETTLEMENTS; WOMEN'S GROUPS SUCH AS THE Y.W.C.A. OF METROPOLITAN CHICAGO, THE NATIONAL COUNCIL OF JEWISH WOMEN, THE COUNCIL OF CATHOLIC WOMEN, THE CHICAGO LEAGUE OF WOMEN VOTERS, THE NATIONAL ORGANIZATION FOR WOMEN, AND THE LEAGUE OF BLACK WOMEN.

THE CHILD CARE CRISIS IN CHICAGO IS A CONTINUING ONE. THERE IS A CRITICAL SHORTAGE OF FACILITIES, OF FUNDS, OF ACCESS TO RELATED SERVICES AND OF MEANINGFUL PARENT INVOLVEMENT. BECAUSE THE COUNCIL, AS A CHILD ADVOCACY GROUP, IS NOT ITSELF ENGAGED IN DIRECT SERVICES TO CHILDREN, IT HAS FOCUSED ITS TOTAL ENERGIES AND RESOURCES ON THE BROADER NEEDS AND GOALS OF QUALITY CHILD CARE PROGRAMS.

THE COUNCIL HAS LED THE FIGHT TO EXPAND DAY CARE FACILITIES IN THIS CITY THROUGH INCREASED FEDERAL, STATE AND MUNICIPAL APPROPRIATIONS AND BY CONTINUED ADVOCACY OF FAIRER ELIGIBILITY REQUIREMENTS, IN ORDER TO OPEN UP MORE PROGRAMS TO LOW INCOME WORKING PARENTS WHO WANT TO CONTINUE TO BE SELF-SUPPORTING AND

ENDORSED BY THE CHICAGO ASSOCIATION OF COMMERCE AND INDUSTRY
(A non-profit organization. All contributions are tax deductible.)

SELF-SUFFICIENT, OR TO GET OFF AND STAY OFF THE WELFARE ROLLS.

OUR COUNCIL INITIATED A SUCCESSFUL STATE-WIDE CAMPAIGN FOR THE ESTABLISHMENT OF AN OFFICE OF CHILD DEVELOPMENT IN THE ILLINOIS DEPARTMENT OF CHILDREN AND FAMILY SERVICES BECAUSE OF THE NEED FOR BETTER STATE PLANNING AND COORDINATION. THROUGH THAT OFFICE WE NOW HAVE A VIABLE STATE MECHANISM FOR EXPANDING PROGRAMS IN NEEDY COMMUNITIES, PROVIDED MORE FEDERAL FUNDS ARE FINALLY MADE AVAILABLE THROUGH THE LEGISLATION WE ARE ENTHUSIASTICALLY SUPPORTING TODAY - BOTH THE HOUSE AND SENATE CHILD AND FAMILY SERVICES BILLS OF 1975.

ACCORDING TO THE 1970 CENSUS THERE WERE 343,062 CHILDREN UNDER THE AGE OF 6 IN OUR CITY, AND CHICAGO SHOWED A HIGHER PERCENTAGE OF WORKING MOTHERS THAN THE NATION AS A WHOLE: APPROXIMATELY ONE OUT OF EVERY THREE PRE-SCHOOLERS IN CHICAGO - CLOSE TO 113,000 CHILDREN, UNDER 6, HAD A WORKING MOTHER. THERE HAS BEEN SOME RECENT DECREASE IN THE NUMBER OF CHILDREN UNDER 6, ACCORDING TO SOME SURVEYS, BUT WE ALSO KNOW THAT, DESPITE THE RECESSION, MORE WOMEN ARE ENTERING THE WORK FORCE. FURTHER, WE ARE SEEING AN ASTOUNDING INCREASE IN ONE PARENT FAMILIES. WE KNOW THAT THOUSANDS OF HUSBANDS ARE EITHER LOSING JOBS OR EARNING TOO LITTLE TO PROVIDE ADEQUATE SUPPORT, AND INCREASING NUMBERS OF WOMEN ARE TAKING ANY JOB THEY CAN GET, AT ANY WAGE AVAILABLE.

AT THE SAME TIME, THERE ARE UNDER 30,000 SLOTS IN ALL OF CHICAGO'S DAY CARE PROGRAMS, INCLUDING FULL DAY AND HALF DAY HEAD START CENTERS AND LICENSED HOMES. IN THE ENTIRE CITY, THERE ARE NO MORE THAN 16,590 LICENSED FULL DAY CARE CENTER PLACES AVAILABLE. IF EVERY ONE OF THESE 16,590 FULL DAY CARE SLOTS WERE FILLED BY A CHILD WHOSE MOTHER WAS WORKING, WE WOULD STILL BE MEETING ONLY ABOUT 15% OF THE MOST OBVIOUS NEED. ALL CONCERNED CITIZENS MUST ASK THEMSELVES HOW ADEQUATELY OVER 95,000 PRE-SCHOOL CHILDREN OF WORKING MOTHERS ARE BEING CARED FOR, NOT TO MENTION THE ADDITIONAL THOUSANDS OF CHILDREN FROM SICK, POOR OR OTHERWISE NEEDY FAMILIES, WHO WOULD BENEFIT FROM DEVELOPMENTAL CHILD CARE.

WE DO KNOW WHERE SOME OF THESE CHILDREN ARE. THEY ARE LOCKED ALONE IN EMPTY APARTMENTS, OR WITH UNRELIABLE BABYSITTERS. A SURVEY CONDUCTED BY THE CHICAGO REGION PTA, AT OUR REQUEST, REVEALS THAT HUNDREDS OF ELEMENTARY AND HIGH SCHOOL STUDENTS ARE BEING KEPT OUT OF SCHOOL PERIODICALLY TO CARE FOR PRE-SCHOOL BROTHERS AND SISTERS, NOT BECAUSE THEIR PARENTS DON'T CARE, BUT BECAUSE THEY HAVE NO OTHER RESOURCE. ALTHOUGH IT HAS BECOME ALMOST A CLICHÉ, IT IS NO LESS TRUE AS WE AND YOU KNOW, THAT THESE EARLIEST YEARS ARE THE MOST CRUCIAL TO A CHILD'S REALIZATION OF HIS FULL POTENTIAL. AS YOU HAVE HEARD FROM AN OVERWHELMING NUMBER OF EXPERTS, IT IS IN THESE EARLIEST YEARS THAT LEARNING DISABILITIES, PERCEPTUAL HANDICAPS, VISION AND HEARING IMPAIRMENTS, AND NUTRITIONAL DEFICIENCIES SHOULD BE DIAGNOSED AND TREATED IF PERMANENT DAMAGE IS TO BE AVERTED. DR. EDWARD ZIGLER, ONE OF THE FORMER DIRECTORS OF THE U.S. OFFICE OF CHILD DEVELOPMENT, HAS REPEATEDLY WARNED THAT "A SIGNIFICANT SHARE OF THE BLAME FOR MASSIVE INCREASES IN JUVENILE DELINQUENCY AND DRUG ABUSE IS A NATIONAL NEGLECT OF TRAGIC PROPORTIONS OF THE NEEDS OF YOUNG CHILDREN." CONTINUED NEGLECT COSTS OUR SOCIETY FAR MORE THAN THE COST OF EARLY INTERVENTION AND PREVENTION PROGRAMS. WITNESS THE CURRENT APPALLING INCREASE IN CHILD ABUSE AND FAMILY DISINTEGRATION! THE ILLINOIS FIGURES ARE EQUALLY DISTRESSING IN ASSESSING THE WIDE GAP BETWEEN THE NEED FOR ALL KINDS OF SERVICES AND THE AVAILABLE REALITY.

THE 1970 CENSUS DATA LISTS 1,146,793 CHILDREN UNDER SIX YEARS OF AGE IN THE STATE OF ILLINOIS. THERE ARE 333,134 CHILDREN UNDER SIX YEARS WITH WORKING MOTHERS. THERE ARE CLOSE TO 100,000 CHILDREN UNDER SIX IN FEMALE-HEADED FAMILIES. ILLINOIS HAS 134,616 CHILDREN UNDER SIX LIVING IN FAMILIES BELOW THE POVERTY LEVEL.

ACCORDING TO THE 1974 REPORT OF THE OFFICE OF CHILD DEVELOPMENT OF THE ILLINOIS DEPARTMENT OF CHILDREN AND FAMILY SERVICES, THE STATE HAS 81,406 SLOTS AVAILABLE IN LICENSED DAY CARE CENTERS, NOT ALL OF WHICH PROVIDE FULL DAY PROGRAMS.

THERE ARE AN ADDITIONAL 20,329 PLACES AVAILABLE IN LICENSED HOMES FOR CHILDREN WHO NEED CARE OUTSIDE OF THEIR OWN FAMILY. THE TOTAL PRESENT CAPACITY FOR OUT OF HOME DAY CARE IN ILLINOIS IS 101,735. A CONSERVATIVE ESTIMATE WOULD BE THAT THIS IS FROM 65% TO 75% LESS THAN THE MINIMUM ESSENTIAL TO THE FUTURE WELL-BEING OF THOUSANDS OF OUR STATE'S MOST NEGLECTED AND VULNERABLE CHILDREN BETWEEN THE AGES OF TWO AND SIX. THIS IS NOT EVEN TAKING INTO ACCOUNT THE EVER INCREASING NUMBER OF MOTHERS WHO ARE RETURNING TO WORK WHEN THEIR CHILDREN ARE LESS THAN TWO YEARS OLD, NOR THE VAST NUMBER OF LATCH KEY CHILDREN FOR WHOM THERE ARE NO AFTER SCHOOL PROGRAMS, WHERE THEY WILL RECEIVE ACCEPTABLE SUPERVISION. AGAIN, THERE IS A PITIFUL LACK OF GOOD AFTER SCHOOL PROGRAMS FOR THE YOUNG SCHOOL-AGE CHILD, AVAILABLE EITHER THROUGH SETTLEMENT HOUSES, DAY CARE CENTERS OR OTHER YOUTH-SERVING FACILITIES. LESS THAN 1 % OF THE ESTIMATED NEED FOR SUCH CARE IS BEING MET BOTH IN CHICAGO AND IN ILLINOIS AS A WHOLE. COMMUNITY BASED IN-SERVICE TRAINING PROGRAMS FOR CHILD CARE WORKERS ARE SPOTTY AND UNCOORDINATED, RESULTING IN UNEVEN QUALITY AND EVEN IN SUB-STANDARD CARE IN ALL TOO MANY INSTANCES OF WHICH WE AND THE STATE ARE AWARE. WE ESPECIALLY APPLAUD THE SECTIONS IN BOTH BILLS PROVIDING FOR RESEARCH AND TRAINING COMPONENTS. THE SHORTAGE OF SUPPLEMENTARY MEDICAL, DENTAL, SOCIAL, NUTRITIONAL AND PSYCHOLOGICAL SERVICES FOR ALL BUT A RELATIVELY FEW SUBSIDIZED PROGRAMS IS A SCANDAL IN A COUNTRY THAT CLAIMS TO CARE ABOUT ITS CHILDREN. OTHERS TESTIFYING WILL HAVE TO FILL IN SOME OF THE STATISTICAL DATA WE ARE UNABLE TO SUPPLY, IN LIGHT OF THE FACT THAT WE ARE A CITIZEN'S GROUP WITHOUT A BIG BUDGET, NO GOVERNMENT FUNDING, AND ONLY TWO PAID STAFF, AN EXECUTIVE COORDINATOR AND A SECRETARY.

BUT WE DO SPEAK AS ONE VOICE FOR MOST OF THE DAY CARE COMMUNITY OF THE CHICAGO AREA. WE DESPERATELY NEED THE ENABLING LEGISLATION YOU MEMBERS OF CONGRESS ARE SPONSORING, AND WE NEED IT NOW. WE ARE NOT DISPOSED TO PICK AND CHOSE AMONG MINOR DIFFERENCES IN THE HOUSE AND THE SENATE BILLS. WE WOULD HAPPILY ACCEPT EITHER VERSION. WE CANNOT FORGIVE THE FORMER PRESIDENT'S UNCONSCIONABLE VETO OF THE 1971 COMPREHENSIVE CHILD CARE ACT, WHICH SO MANY

OF US WORKED SO HARD TO PASS. WE HOPE THIS CONGRESS IS TOUGH ENOUGH TO OVERRIDE, IN THE UNHAPPY EVENT THE PRESENT INCUMBENT IN THE WHITE HOUSE IS SIMILARLY DISPOSED. HUMAN SERVICES MUST BE GIVEN PRIORITY IF THIS NATION IS TO LIVE UP TO ITS BICENTENNIAL PROMISE. WE CANNOT ACCEPT PRESIDENT FORD'S BUDGET PRIORITIES. WE DO ESPECIALLY SUPPORT SECTION 102 IN H.R. 2966, WHICH IS AN ADMIRABLE COMPILATION OF THE KINDS OF DIAGNOSTIC SCREENING AND TREATMENT PROGRAMS VITALLY NEEDED IN VIRTUALLY ALL PARTS OF OUR CITY AND STATE.

THOUSANDS OF OUR CHILDREN NEED MORE FOOD, BETTER NUTRITION AND HEALTH CARE, PLUS ALL KINDS OF DEVELOPMENTAL HELP, MUCH MORE THAN AMERICA NEEDS TO BE SPENDING MORE BILLIONS FOR AIRCRAFT BOMBERS AND CARRIERS. OUR CHILDREN NEED QUALITY CHILD CARE MUCH MORE THAN AMERICA NEEDS A SWOLLEN DEFENCE ESTABLISHMENT TO CONTINUE TO ENLARGE OUR OVERKILL CAPACITY.

FINALLY, OUR BOARD AND MEMBERSHIP, AFTER MONTHS OF DISCUSSION, ADOPTED ON MAY 23, 1975, STATEMENTS OF PRINCIPLE RELEVANT TO TWO MAJOR CONCERNS OF THE SPONSORS OF S. 626 AND H.R. 2966 AS FOLLOWS:

1. The Day Care Crisis Council of the Chicago Area opposes direct Federal subsidy of proprietary programs, but favors the purchase of Day Care slots, in centers which are in compliance with State Licensing standards, on a payment-for-service basis.

2. The Day Care Crisis Council opposes amending the Mondale-Brademas Child and Family Services Act to designate the Public Schools as presumed prime sponsor, and favors the legislation as presently written providing for a variety of local options in the determination of the prime sponsor.

IN CONCLUSION, OUR CHILDREN NEED A CHILD AND FAMILY SERVICES ACT THIS YEAR AND WE HOPE ALL OF YOU WILL LEND YOUR BEST EFFORTS TO MAKE PASSAGE OF SUCH AN ACT A MOST APPROPRIATE BICENTENNIAL BIRTHDAY PRESENT TO OUR NATION'S CHILDREN.

2 Attachments - "Some Important Facts About Needs For Child Care in Chicago" published by the Mayor's Office of Child Care Services.
"Day Care Needs in Illinois"
page 58, Focus on Day Care in Illinois, published by the Office of Child Development, Ill. Department of Children and Family Services.

SOME IMPORTANT FACTS ABOUT NEEDS FOR CHILD CARE IN CHICAGO

293,279	children in Chicago are under six years of age in 1974 and of these children
111,578	children under six years of age are in families where the mother is in the labor force. This represents 38% of the children under six years of age. 28,219 or one-fourth of these children whose mothers are working are in female headed households where the mother is the sole support of the family.
543,417	children in Chicago are between the ages of six and 14 years.
285,414	children between six and 14 years of age have mothers in the labor force. This represents 53.5% of the children in this age group. 86,978 or one-third (30.47%) of these children are in one parent female headed households.

RESOURCES

16,591	slots in 287 full day care centers can only accommodate a little over 14.5% leaving 85% or over 95,000 of the children under six with mothers in the labor force without a source of licensed child care.
10,000	slots in 116 Head Start Programs provide development services for about 30% of the 34,183 children between the ages of three and five years who are in families with incomes below poverty. 24,000 could benefit from additional Head Start Programs.
1,754	slots for children ages 6 to 14 years old in 28 before-school and after-school centers now provide care for less than 1% of the 285,000 children of working mothers in this age bracket.

Mayor's Office of Child Care Services
February, 1975

DAY CARE NEEDS IN ILLINOIS

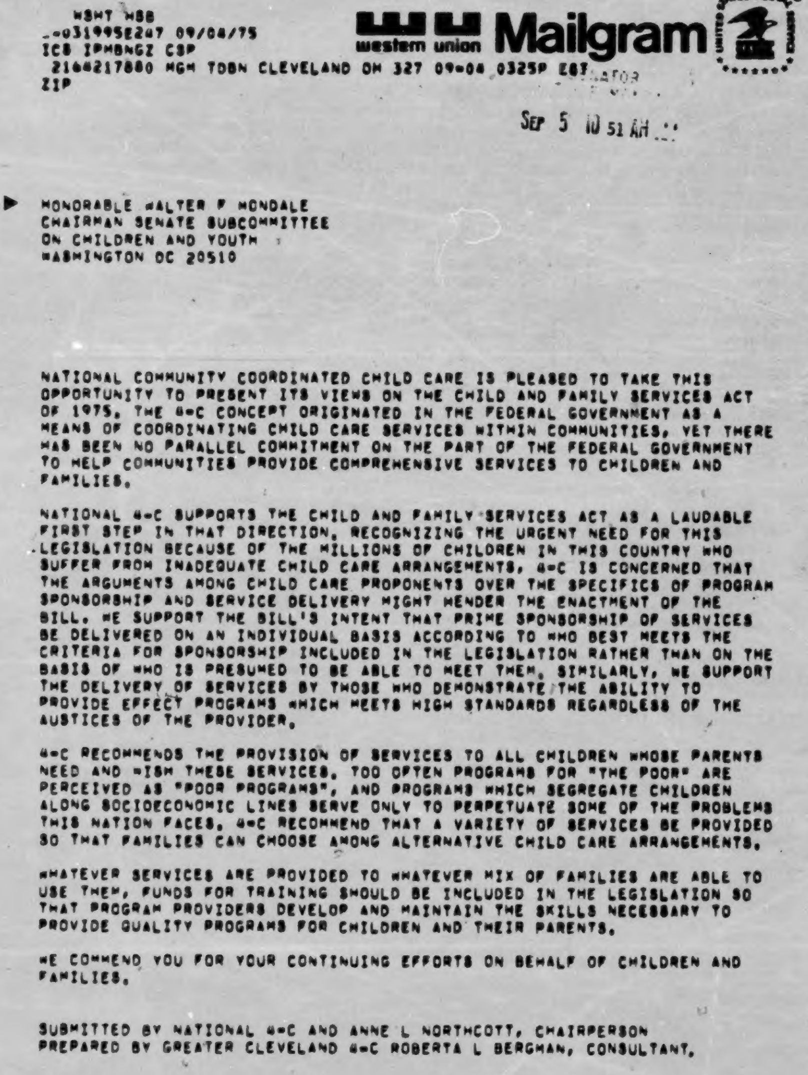
The overall need for day care in Illinois is dramatized by the fact that according to the 1970 census enumeration there are 333,134 children under six and 617,446 children aged six to 13 who have working mothers. These figures are based on labor force participation in 1969 and have undoubtedly increased significantly in the six years since the tabulation. Yet in Illinois there are currently only 99,837 licensed spaces in child care facilities to serve these children. In addition, most of these spaces are serving children aged three to five years of age. Thus, child care resources for infant and school age children of working parents are even more seriously limited.

Children in low income and public assistance families whose parents are working or in training programs may receive child care through funds provided by the Department of Public Aid or the Department of Children and Family Services. In fiscal year 1974, approximately 32,000 children received such services each month with 75 to 90 percent of the State's expenditures eligible for Federal reimbursement through Title IV-A of the Social Security Act. However, according to the 1970 census there are 84,459 preschool and 131,744 school age children who are eligible and in need of these services. Illinois is therefore barely serving 15 percent of the total target population.

In October 1975, Title IV-A will be replaced by provisions in Title XX. Title XX provisions will dramatically expand the number of children eligible for day care services. Preliminary studies have indicated that as many as 160,000 preschool children and 300,000 school age children in Illinois will be eligible for day care services provided by DCFS and DPA. Thus, the demand for increases in day care funding will continue. Illinois, however, is facing a financial dilemma in that it is about to reach its maximum in Federal reimbursement under the Social Security Act. Therefore, any expansion in services will have to be wholly financed by State and local dollars, the availability of which is limited.

To add to the above statements of need, there are an additional 2,000 preschool and school age migrant children who come to Illinois each year for whom day care is desperately needed. These are children who are not being served in any of the existing programs of the Illinois Office of Education and the Department of Children and Family Services. Illinois also has a large number of "settled out" migrant families (those who have left the migratory stream within the last five years). At least 3,000 preschool children are in these families and will be facing entrance to largely monolingual schools within two years. The Department of Children and Family Services funds three year-round day care programs serving approximately 117 of these children. Yet the number of these families is growing annually, and year-round programs are needed to provide a bilingual program to prepare these preschoolers for adjustment into the public school system.

Each year more and more people are becoming aware of the virtually limitless value of day care: as an alternative to placement of children outside of their homes; as a valuable tool in helping to expand early identification and treatment of children with special physical and emotional needs; as a valuable resource for the single parent and the low income family who wish to reach or maintain economic self support; as a positive experience for the child in a stressful family situation. As this awareness continues to grow, so too will the commitment of all individuals toward expansion of quality child care resources. It is only through such commitment that we will be able to ensure progress toward meeting the day care needs of Illinois children.



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HONORABLE WALTER F MONDALE
CHAIRMAN SENATE SUBCOMMITTEE
ON CHILDREN AND YOUTH
WASHINGTON DC 20510

NATIONAL COMMUNITY COORDINATED CHILD CARE IS PLEASED TO TAKE THIS OPPORTUNITY TO PRESENT ITS VIEWS ON THE CHILD AND FAMILY SERVICES ACT OF 1975. THE 4-C CONCEPT ORIGINATED IN THE FEDERAL GOVERNMENT AS A MEANS OF COORDINATING CHILD CARE SERVICES WITHIN COMMUNITIES, YET THERE HAS BEEN NO PARALLEL COMMITMENT ON THE PART OF THE FEDERAL GOVERNMENT TO HELP COMMUNITIES PROVIDE COMPREHENSIVE SERVICES TO CHILDREN AND FAMILIES.

NATIONAL 4-C SUPPORTS THE CHILD AND FAMILY SERVICES ACT AS A LAUDABLE FIRST STEP IN THAT DIRECTION, RECOGNIZING THE URGENT NEED FOR THIS LEGISLATION BECAUSE OF THE MILLIONS OF CHILDREN IN THIS COUNTRY WHO SUFFER FROM INADEQUATE CHILD CARE ARRANGEMENTS. 4-C IS CONCERNED THAT THE ARGUMENTS AMONG CHILD CARE PROPONENTS OVER THE SPECIFICS OF PROGRAM SPONSORSHIP AND SERVICE DELIVERY MIGHT HENDER THE ENACTMENT OF THE BILL. WE SUPPORT THE BILL'S INTENT THAT PRIME SPONSORSHIP OF SERVICES BE DELIVERED ON AN INDIVIDUAL BASIS ACCORDING TO WHO BEST MEETS THE CRITERIA FOR SPONSORSHIP INCLUDED IN THE LEGISLATION RATHER THAN ON THE BASIS OF WHO IS PRESUMED TO BE ABLE TO MEET THEM. SIMILARLY, WE SUPPORT THE DELIVERY OF SERVICES BY THOSE WHO DEMONSTRATE THE ABILITY TO PROVIDE EFFECT PROGRAMS WHICH MEETS HIGH STANDARDS REGARDLESS OF THE AUSTICES OF THE PROVIDER.

4-C RECOMMENDS THE PROVISION OF SERVICES TO ALL CHILDREN WHOSE PARENTS NEED AND WISH THESE SERVICES. TOO OFTEN PROGRAMS FOR "THE POOR" ARE PERCEIVED AS "POOR PROGRAMS", AND PROGRAMS WHICH SEGREGATE CHILDREN ALONG SOCIOECONOMIC LINES SERVE ONLY TO PERPETUATE SOME OF THE PROBLEMS THIS NATION FACES. 4-C RECOMMEND THAT A VARIETY OF SERVICES BE PROVIDED SO THAT FAMILIES CAN CHOOSE AMONG ALTERNATIVE CHILD CARE ARRANGEMENTS.

WHATEVER SERVICES ARE PROVIDED TO WHATEVER MIX OF FAMILIES ARE ABLE TO USE THEM, FUNDS FOR TRAINING SHOULD BE INCLUDED IN THE LEGISLATION SO THAT PROGRAM PROVIDERS DEVELOP AND MAINTAIN THE SKILLS NECESSARY TO PROVIDE QUALITY PROGRAMS FOR CHILDREN AND THEIR PARENTS.

WE COMMEND YOU FOR YOUR CONTINUING EFFORTS ON BEHALF OF CHILDREN AND FAMILIES.

SUBMITTED BY NATIONAL 4-C AND ANNE L NORTHCOTT, CHAIRPERSON
PREPARED BY GREATER CLEVELAND 4-C ROBERTA L BERGMAN, CONSULTANT.

STATEMENT
OF
JOYCE ADEMA, O.D., PRESIDENT
COLLEGE OF OPTOMETRISTS IN VISION DEVELOPMENT
ON THE
CHILD AND FAMILY SERVICES ACT
(S.626 and H.R.2966)

September 4, 1975

College of Optometrists
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COLLEGE OF OPTOMETRISTS IN VISION DEVELOPMENT

Mr. Chairman, my name is Joyce Adema, I am a doctor of optometry and a working mother. I am also president of the College of Optometrists in Vision Development. As president of the College, I want to express the appreciation of its members for this opportunity to present our views on S.626 and H.R. 2966, the "Child and Family Services Act".

Our College is a relatively new organization in comparison to other organizations in this country. I would like to give you some information about it so that you can better understand the positions we have adopted.

The origins of our College go back to 1964. It was organized to serve as a spokesman for optometrists who engage in vision therapy and wish to insure that the public will receive continually improving vision care based on functional and developmental concepts of vision. It is an allied organization of the American Optometric Association.

Qualifications for fellowship in the College are stringent. To become a fellow, a person must have completed his pre-optometric education, which is usually four years, a mandatory four years in an optometric school or college, and three graduate years or more of clinical experience in vision development. During these three graduate years, the person must have taken at least two hundred hours of education related to vision development. The candidate for fellowship then qualifies to write three case reports and a statement on the candidate's philosophy of vision. If found acceptable, the candidate then takes both a written and an oral examination to ascertain knowledge and experience. Success through these hurdles qualifies an optometrist for certification as a fellow of the College for one year only. Thirty hours of continuing education related to vision development are required for renewal of certification each year.

There are approximately seven thousand doctors of optometry today engaged in the full-time or part-time practice of developmental vision care. I am proud to represent them and to present this statement on their behalf as part of the record of your hearings on this important legislation.

Our optometric curriculum includes not only the physics, mathematics and biological subjects one would expect in our profession, it also includes studies of the social, emotional and psychological needs of the individual.

We fully support the findings and purpose contained in Section 2 wherein it is stated that Congress finds the family is the primary and the most fundamental influence on children and holds that its purpose is to build upon and strengthen the role of the family.

We agree with the desire of the legislations' sponsors to build upon the experience and success of "Homestart", "Headstart", "Follow Through", and other existing programs. We were among the first of health professionals to volunteer our time, knowledge and service to the Headstart program.

We are grateful that we had the support of former President Lyndon Baines Johnson, who gave parental consent to this daughter Luci, now Mrs. Patrick I. Nugent, so that she could encourage and participate in the founding of "Volunteers for Vision, Inc.", a non-profit auxiliary program to Headstart.

Mrs. Nugent was recently elected President of the Volunteers for Vision program whose purpose is to discover and help the visually disadvantaged child. It has chartered over twenty chapters and screened thousands of children from the east coast to the west coast since its inception in 1965. This year marks its 10th Anniversary of service to the children of our nation.

We not only believe in doing good things for children, we are professionally committed to the practice of our belief every hour of every working day.

We agree with the intent of this legislation to place more emphasis on the needs of children through age five and expecially welcome the legislation's provisions for greater involvement of their parents. The earliest years are the most important formative years in any individual's life and parents have the greatest influence on those years.

A child learns most of the vocabulary he will use for the rest of his life from the natural influence of his parents. The parent is the child's first teacher introducing the girl-child or the boy-child not only to the basic skills of reading, writing and arithmetic but also to the practical matters like health care and money management that he will need all his adult life.

We recognize the importance of day care facilities and particularly for working mothers and single parents. However, we would like to see greater attention given to home-based programs. For various reasons a day care center may not be adequate to the needs of a family. It may be too distant for some families, or they may have a handicapped child with whom it is difficult to travel. We believe the child and the parent should have the opportunity to voluntarily partake of either or both of these programs. We have worked with Homestart, Headstart, and Follow Through programs and appreciate the advantages when they are coordinated for the child's benefit.

As a parent and an optometrist, I believe we should know as much about the strengths and weaknesses of a child as it is possible for us to learn. We should then help the child capitalize on its strengths and do what we can about the weaknesses. Some are obvious. Some are not. To know what are strengths and what are weaknesses we have norms for comparison that are acceptable in terms of the common sense values of our communities. What is acceptable in one community, however, may be controversible in another. Usually the one community will have some new knowledge that is not known or accepted by the other until demonstrated to the satisfaction of the peers of that community. To further establish this premise and help explain the position of the College, I am attaching two documents which I respectfully request be made a part of your record.

The first document is taken from the Monographs of the Society for Research in Child Development. (Many of our Fellows are members of this Society.) Its title is "The Development of Perception in the Preschool Child". The author is A.V. Zaporozhets, director of the Institute of Preschool Education, Academy of Pedagogical Sciences of the Russian Federation. This paper by A.V. Zaporozhets was given at the Fifth International Conference on Intellective Processess, held in Voksenasen, Oslo, Norway.

I should explain that cognition and the development of cognitive processes have long been the central interests of a number of outstanding European Theorists and researchers. Included among them are;

Zofia Babska: Department of Psychology of the University of Warsaw, trained at the University of Warsaw and spent a post-doctoral year as a visiting

scholar at the University of California, Berkeley.
Barbel Inhelder: Professor of Psychology, Institut des Sciences de l'Education, University of Geneva.
Eric A. Lunzer: Department of Education of the University of Manchester, England.
Neil O'Connor: Social Psychiatry Research Unit of the Institute of Psychiatry, Mandsley Hospital, London.
Hanus Papousek: Director of the Laboratory for Research in Higher Nervous Activity, Institute for the Care of Mother and Child, Prague, Czechoslovakia.
Kjell Raaheim: Member of the Institute of Philosophy of the University of Bergen, Norway.
Alina Szeminska: Psychology Department, University of Warsaw, Poland. Coauthor with Jean Piaget (Geneva) of a number of books and articles.

American investigators had but fragmentary or insufficient knowledge of the work of these European researchers and theorists until a grant from the Carnegie Foundation of New York made it possible for the Committee on Intellective Processes Research of the Social Science Research Council (U.S.) to sponsor these International Conferences.

We are bringing the paper by Zaporozhets to your attention because it supports by research the concepts of mental imagery and sensory processes, of developmental vision care and vision therapy, long held by optometrists and proven to their satisfaction in clinical practice.

According to Zaporozhets:

"Our studies show that the process of sensory learning can flow chaotically and not be productive. But if you organize the process in accordance with the psychological regularities of the stage of formation of perceptive actions, the effectiveness of this learning can be considerably raised."

"This concept of sensory processes is based on investigation by Soviet researches (A.N. Leontiev, B.L. Ananiev, P.Y. Galperin, A.V. Zaporozhets, V.P. Zinchenko, and others) who reject (on the basis of Pavlov's reflex theory) the receptory concept of the process of perception, which dominated psychology for a long time. We look upon this process as a certain perceptive action. Important roles in such perceptive actions are played by their effectory components, that is, movements of the hand touching the object or movements of the eye following the outline of the perceived figure. The function of these orienting-exploratory movements is to investigate the object and form a copy - an adequate image of the object - by reproducing its features or forming a "likeness"."

"Motor correction, which is achieved through the movements of the sense organs, probably plays a role in the perception processes analagous to that of sensory correction in the control of complex movements. As we tried to show in another work, making a model of an object with the help of external movements and, in particular, with the movements of receptory apparatus makes it possible for the subject to superimpose, so to say, the created model on the perceived object and, thus, to compare them. The reciprocal afferentation (feedback) from this comparison - the signals of differences - enable the subject to make necessary corrections in the model and to make the copy more precise. In other words, perceptive actions probably perform not only exploratory and modeling functions but corrective functions as well, providing for an orthoscopic sensory image that is adequate to the object perceived."

"During the first years of life perception follows a very complicated pattern of development. The followers of Gestalt theory support the view that a newly born child possesses the basic specific features of perception in ready-made forms. Contrary to their views, however, more and more experimental data are being accumulated testifying to the fact that sensory processes become more complicated gradually as a result of which perceptive images, appearing at different ontogenetic stages, become more and more orthoscopic, that is reflect the environments more fully and adequately.---the increasing effectiveness of solving various sensory problems depends upon the development of children's perceptive activity, that is, upon the degree to which they acquire more perfect means of acquainting themselves with the objects they perceive."

The second attached document is a news clipping from the August 18th issue of the Washington Star. Entitled "Brave New World for Kindergartners", it was written by Robert Reinhold of the New York Times News Service and appeared on the editorial page. This article describes a school program in Muncie, Indiana. The program uses many of the concepts researched by Europeans who participated in the International Conferences on Intellective Processes.

Mr. Reinhold reports that his "Insight Unlimited" project of the Muncie School District is based in large part on the theories of James R. Watkins, doctor of optometry who runs the Institute for the Multidisciplinary Approach to the Diagnosis and Development of Individual Abilities in Lexington, KY. (Dr. Watkins is also a Fellow of the College of Optometrists in Vision Development.)

As stated in the article; the theory is that children with lags in perceptual and motor development will have difficulty in class, so the program tries to identify each child's strengths and weaknesses. This, "theoretically", allows the teacher to take advantage of the strength, while putting him through motor and sensory exercises "thought" to show up his weaknesses. (The quotation marks are mine to show the author's doubts concerning this theory.)

In his story, Mr. Reinhold reports: "When 300 children begin kindergarten at four elementary schools here next month, their lives will be an open book to the teachers.

"Can the child identify where sounds come from? Which side of his brain is dominant? How good is his eye-hand coordination? Does he wet his bed?"

Answers to these and many more questions are in files compiled for each pupil.

"The files are the products of a growing - and controversial - trend in American education to prescreen children for potential learning and behavior problems."

"In the screening, which is done by regular teachers, counselors, and parents, each child spends about five minutes at each of 17 stations. He is tested for such skills as auditory motor sequencing, visual discrimination, muscle balance, and counting."

"If a 'developmental lag' is detected, appropriate steps are taken. For example, according to Suzanne Cline, the remediation specialist at the Royerton Elementary School, a child with weak 'visual memory' might be given practice in matching words on a peg board. Or if his visual motor coordination is poor, he may be trained to walk on a balance beam."

Mr. Reinhold asks: "But is there any empirical evidence that the remedies really ward off or correct learning problems? Cautious academic experts say the evidence is equivocal at best."

We support the desires of the Muncie staff to spread their concept as reported by Mr. Reinhold, throughout the country and to obtain funds from the U.S. Office of Education to set up model demonstration units. We would like these demonstrations to include research which we are convinced from our own studies and clinical practice, will offer "adequate evidence of efficacy".

We believe it appropriate, therefore, that Section 302 of the "Child and Family Services Act" includes authorization for a program of research and demonstration projects which shall include :

"(1) research to develop techniques to measure and evaluate child and family services, and to develop standards to evaluate professional and paraprofessional child and family service personnel;

(2) research to test preschool programs emphasizing reading and reading readiness;

(3) preventive medicine and techniques and technology, including multiphasic screening and testing, to improve the early diagnosis and treatment of diseases and learning disabilities of pre-school children;

(4) research to test alternative methods of providing child and family service;

(5) evaluation of research findings and the development of these findings and the effective application thereof;

(6) dissemination and application of research and development efforts and demonstration projects to child and family service and related programs and early childhood education, using regional demonstration centers and advisory services where feasible;

(7) production of informational systems and other resources necessary to support the activities authorized by this Act;

(8) developing methods of determining the needs of individual children in particular areas such as education, nutrition and medical services, so as to permit the modification of programs to fit the needs of individual children; and

(9) a study of the need on a nationwide basis for child and family services programs and of the resources, including personnel, which are available to meet this need."

Doctors of Optometry do not provide services that fit within the terms "preventive medicine" and "medical services" as those terms are understood and enforced under the laws of our respective states.

We respectfully request that subsection 302 (a) (3) be amended to read:

> "preventive ~~medicine~~ health care and techniques and technology, including multiphasic screening and testing, to improve the early diagnosis and treatment of ~~diseases~~ health problems and learning disabilities of pre-school children;"

We also request that subsection 302 (a) (8) be amended to read:

> "developing methods of determining the needs of individual children in particular areas such as education, nutrition and ~~medical~~ health services, so as to permit the modification of programs to fit the needs of individual children;"

We support the language in Section 102 which includes funds under the provisions of this section for -

"(G) diagnosis, identification, and treatment of visual, hearing speech, medical, dental, nutritional, and other physical, mental, psychological, and emotional barriers to full participation in child and family services programs;

(H) special activities designed to identify and ameliorate identified physical, mental and emotional handicaps and special learning disabilities as an incorporated part of programs conducted under this title;"

We ask that the activities described in these two subsections be considered "health care" and "health services" for the purposes of Section 302 and that any report on this legislation show this is the intent.

To understand optometry and the child, you should also know something about vision, how it develops, and the integration of the senses.

The optometrist's influence on the child is in relation to the child's vision development. Vision is a learned process, and because we know the visual system responds to pressures of stress in our environment, we are concerned not only with visual acuity, but with the total human function, so we may follow through with a complete vision care program advocating prevention as the ultimate goal.

The integration of the senses is one of the least understood human functions and yet of the greatest importance to a child's development. When we say vision, we are talking about central processes which are going on in the brain. When we say sight, we are talking about something else. Sight is a measure of how small an object a person can see at a fixed distance. Sight is seeing the object. Vision includes getting meaning out of what is being seen. Vision is the mental image a person develops from sight clues.

The vision system we are talking about is composed of the two eyes, their connections to the brain, and the rest of the body. The system is very complex, and includes the other senses and memory recall systems. For example; should someone tell you a story, you take the auditory signal (words) and construct for yourself visual images. You enter a bakery or a delicatessen and smell the aromas and construct a mental image of the food associated with those aromas. The human being thinks in visual images. The visual system is responsible for eighty percent of all learning.

Vision, as we know it, does not exist at birth, but comes from years of visual motor experiences and development. Optometrists understand vision as a complex of learned skills and as a guidance system for motor behavior.

Vision is more complex than other sense modalities and takes longer to develop fully. One consequence of this longer maturation period is that there is a greater probability of anomalies developing. There is a greater opportunity for something to adversely affect the sense development of an individual's vision abilities.

The infant can move his eyes at birth, yet this movement is stimulus-bound. The infant is attracted to light and stimulated to turn toward a bright object or toward a moving object that stands out from its surroundings. Or the infant may look, as a reflex response, to a heard or felt stimulus. At first, the infant may move his head to look, then he learns he can move his eyes alone to follow whatever has stimulated him.

Vision can be distorted by interfering with the child's development. As visual abilities develop through use they cease to be stimulus-bound. For visual abilities to develop through use, or activity, the movement must be self-generated. (Since self-generated movement plays such a critical role in the development of vision, it is probable that restraining an infant's movements or limiting the baby to carriages and other devices, may contribute to developing vision problems.)

To further illustrate what I have just said; the infant touches what it sees and learns to associate the feel of an object with what it sees. Similarly, the infant puts something in its mouth, or smells it, or listens to it, and associates all these sensory inputs with what it sees. With practice, the child learns accuracy in coordinating its hand and eye movements. It can reach out and grab what it sees in one try, with no misses. It can pick up food in a spoon. The child's vision guides its movement.

Through movement --- to and from, up and down, in and out, in space and in relation to his or her own body and through associating seeing with hearing, touching, smelling --- the child learns. Vision becomes a quicker way to use the information gained originally through other senses. (If the residual sight of a child is as low as five percent of what is normal, the visual system continues to dominate the other senses.)

The child sees an orange on a distant table. Its vision tells it in an instant and with confidence, how the orange will feel when the child touches it, how it will smell when the child gets close to it, and how it will taste when the child eats it.

The child also learns to extend its visual abilities. It learns to move from the concrete to the abstract. Shown a picture of an orange, or the word "orange" it can visualize the fruit, its size, shape, smell and taste. The child also learns to move from the abstract to the concrete through writing or speaking. It can ask for the orange that it does not see.

The anti-gravity system is another system that must be integrated with the sensory-motor systems. This system tells us where down is. We could never stand up and walk if we could not be sure when we were vertical. We learn to judge the horizontal after we have learned the vertical. Our ability to judge the obliques is developed long after we judge both the vertical and horizontal.

There is a story that Alan Shepard frightened the controllers on his historic first American space flight. He had risen beyond the reach of gravity and called back to earth that the cartographer had mistakenly reversed his charts. The moon was supposed to be on his left but he could see it on his right. For a second there was panic. Then the controllers realized he had rolled his craft over. He could not tell where down was so he could not compute direction.

Gross motor tasks are usually included in all perceptual programs so that the patient learns to tell when he is vertical. Distortions in body posture reduce one's ability to judge true vertical.

In the evaluation of visual function, you will often see tests done which may seem unrelated to an eye examination. Certain paper-pencil tests may be scheduled to observe how the patient uses his or her eyes in performing tasks. (In evaluating visual function, we need to know how the two eyes work, not only individually, but more importantly, how they work as a team. Technically, when light focuses on the retina of each eye, an electrical signal is created and then transmitted over the optic nerve to the brain, where instead of seeing two separate images, we mentally unite the images, and see one. The two eyes must therefore be coordinated in both movement and focus. This sensory-motor coordination is controlled by the visual cortex of the brain. There is no physical connection of our two eyes other than through the brain.) In the paper-pencil tests, the examiner observes the patient's posture when doing these tasks so as to evaluate hand-eye coordination. He wants to determine if the patient is more dependent than normal on other senses, such as the kinesthetic. Vision should be the dominant process, but it must be utilized in appropriate conjunction with the other senses.

Hand and eye coordination requires the eyes to coordinate with the hands in locating and manipulating objects in space. Motor experience is vital in learning this type of skill. When these and other systems all coordinate well we get good perception. The signals going to the brain are coherent and the brain can build accurate images in the least amount of time. This mental image is called the Eidelon.

The Eidelon infers understanding. It differs from intelligence because intelligence includes memory and recall. When we develop a good mental picture of what is being presented to us and associate it with past mental pictures, we are learning and developing our intelligence.

The vision testing of an infant through twelve weeks of age differs from the testing of a pre-school child. The testing of a pre-school child differs from the school child and in turn the testing of a school child is different from that of an adult. Testing should be done at the developmental level of the patient to get a valid evaluation. The importance of the testing to the examiner is what is learned about how the visual system of the patient guides the patient's motor functions and influences the patient's behavior.

Visual functions are often confused with intelligence since they are so important in the overall actions and reactions of humans. Because of the complexity of the vision system, there are many different types of vision problems. Usually the most obvious are those which in whole or in part eliminate visual function. Among the most difficult vision problems to detect are those which do not eliminate the visual function, but only reduce its efficiency. Children with these types of problems are often sadly and incorrectly labelled immature or stupid.

Vision therapy modifies and reinforces responses for more efficient functioning of visual processes.

If a child has not learned effortless vision-motor control by developing its own abilities under conditions which have afforded it many opportunities for rewarding practice, vision therapy can provide improved vision-motor control. Control can be learned so well that it becomes a subconscious activity. The successful patient is unaware of the visual abilities he is calling upon in performing tasks --- which is as it should be! The child should be free to interpret symbols. If the child has to work at control, then reading, for example, will be less productive, more stressful, and will probably take more effort than the child is willing to expend.

To repeat, the clarity of the mental image is determined by the coherency of the signal when it reaches the brain. Consider that a child who cannot coordinate its two eyes when looking at an object will tend to see double because each eye is sending a different signal to the brain. Many children who have "turned eyes" see double. This causes an incoherent signal to go to the brain and interferes with the function. When the child cannot tolerate this mental image, it learns to ignore the signal coming from one of his eyes. This causes him to develop a "lazy eye". This problem and other, such as, hand-eye coordination, distinguishing "left" from "right", or coordinating the two eyes, are developmental vision problems amenable to treatment through vision therapy.

The benefits of treatment are easier to obtain in the earliest years of a child's development. We should examine children as soon as possible following birth, and routinely thereafter, to detect and correct incipient problems before there is a reduction in function.

Many of the principles of vision and learning through vision promulgated by optometry can and should be applied by educators and by parents seeking to provide optimum health and an optimal learning situation for their children.

The Cambrian Project of 1973, by Patrick J. Ryan for the Project Staff, California State Department of Education (Research and Teacher Education, Bureau of Professional Development, Division of Compensatory Education), was an experiment in the remediation of reading retardation of first-through-sixth graders by means of auditory, visual, and/or motoric perceptual therapy. It showed that treatment of the perceptual disabilities of otherwise normal children resulted in greater reading gains than were observed for similar children given a remedial program alone.

There are other studies that confirm the strong association between vision disabilities and learning disabilities.

Learning "to read" is literally child's work. The same principles of vision and learning apply to adult's work. This has been demonstrated clinically in optometrists' offices. Patients have reported increased well-being, energy and increased productivity after resolution of their vision problems. However, it is preferable to correct a vision problem early. The individual, his family and community, and this nation stand to benefit.

We have very high hopes that the legislation before you will help us do more for the children and families of our country.

* * *

EXHIBIT II

Monday, August 18, 1975 The Washington Star A-13

Brave New World for Kindergartners

By Robert Reinhold

New York Times News Service

MUNCIE, Ind. — When 300 children begin kindergarten at four elementary schools here next month, their lives will be an open book to the teachers.

Can the child identify where sounds come from? Which side of his brain is dominant? How good is his eye-hand coordination? Does he wet his bed?

Answers to these and many more questions are in files compiled for each pupil.

The files are the products of a growing — and controversial — trend in American education to prescreen children for potential learning and behavior problems.

In Trumbull, Conn., East Ramapo, N.Y., Salisbury, N.C., Shelburne, Vt., Newton, Mass., Richardson, Tex., here at the Delaware Community School Corporation and in many other public school systems, youngsters are being scrutinized and given "preventive remediation."

PROPONENTS argue that screening holds great promise for the thousands of children who cannot learn well in school and therefore suffer irreversible setbacks in their lives. They say that if the neurological or preceptual bases of these problems can be detected early they can be corrected.

But concern is mounting among some educators that many children who are merely troublesome or different are being given vague, unscientific, and possibly self-fulfilling labels regarding possible learning disabilities. And many experts in child development say evidence is lacking that remediation methods have any real impact on learning.

Many schools are pushing ahead, however, and probably none more assiduously than this small Indiana district just north of Muncie.

By now, nearly all 4,000 elementary, middle and high school students in the district have been screened under the program, called "Insight Unlimited," supported by federal funds under Title III of the Elementary and Secondary School Act.

"Our program forces the teacher to look at the total child, at his development and learning modes," said Fred R. Glancy Jr., project director. "They begin to realize what each child can and cannot do and then build a program for him."

THE PROGRAM, he said, was devised by pulling together the products of hundreds of researchers and applying them. It is based in large part on the theories of James R. Watkins, a doctor of optometry who runs the Institute for the Multidisciplinary Approach to the Diagnosis and Development of Individual Abilities in Lexington, Ky.

The Muncie staff is determined to spread their concept throughout the country. They hold demonstrations in many states and abroad, although they still have little empirical evidence that the intervention works. A request for funds from the U.S. Office of Education to set up model demonstration units was rejected recently, partly because the Muncie staff could not offer adequate evidence of efficacy.

Glancy harbors no doubts, however. His voice rings with the authority of a Marine officer, which he once was, and with the fervor of a missionary as he describes the program.

THE THEORY is that children with lags in perceptual and motor development will have difficulty in class, so the program tries to identify each child's strengths and weaknesses. This, theoretically, allows the teacher to take advantage of the strength, while putting him through motor and sensory exercises thought to shore up his weaknesses.

In the screening, which is done by regular teachers, counselors and parents, each child spends about five minutes at each of 17 stations. He is tested for such skills as auditory motor sequencing, visual discrimination, muscle balance and counting.

One recent afternoon as a group was quietly going through the paces — walking on balance beams, drawing circles, listening to recorded tones, repeating numbers and words, drawing persons — little Natalie was trying to draw a straight line between two points, part of something called the Frosting Test of Visual Perception.

As she did the task, the girl stuck her tongue between her lips in hard concentration, and this was noted on the score sheet. "That tells us there is additional concentration and an overflow of motor activity," said Judy Nicely, a teacher.

From such tests, along with parent interviews, a profile of each child is drawn and a recommendation made by a team from the system's Pupil Personnel Service.

NO CHILD is labeled as having "minimal brain disfunction," "dyslexia," "hyperkenesis" or any of the many other learning "disorders" that have provoked controversy in recent years, Glancy says. Except for those with extreme handicaps, he said, all are "mainstream" and go into regular classes.

If a "developmental lag" is detected, appropriate steps are taken. For example, according to Suzanne Cline, the remediation specialist at the Royerton Elementary School, a child with weak "visual memory" might be given practice in matching words on a peg board. Or if his visual-motor coordination is poor, he may be trained to walk on a balance beam.

But is there any empirical evidence that the remedies really ward off or correct learning problems? Cautious academic experts say the evidence is equivocal at best.

Dr. John Guthrie, research director of the International Reading Association, says there is "no evidence" that perceptual-motor training transfers into improved reading potential.

"My view is that learning skills are highly specific," he said. "To discriminate letters and words are discrete skills fairly independent of other things." He said walking on a balance beam may do wonders for balance, but not for reading.

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MARVIN CORNBLATH, M.D.
PROFESSOR AND CHAIRMAN
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September 4, 1975

The Honorable Walter F. Mondale
Chairman
Senate Subcommittee on Children & Youth
United States Senate
Washington, D. C. 20510

Dear Senator Mondale,

Thank you for the opportunity to submit a statement on the Child and Family Services bill S.626 and HR. 2966. Representing the Association of Medical School Pediatric Department Chairman, I would like to congratulate both you and Mr. Brademus on guiding this important legislation through the House and Senate. There is no question that there is a great need for improving and increasing the services provided by the Child and Family Service bills. We appreciate the opportunity to review the bill and to submit for your consideration a number of specific suggestions.

The general purpose and objective of the bill and its funding seem appropriate and critical at this particular time when funding for other Family and Children Programs are being severely constricted (Title V). There are a number of excellent features in the bill that must be retained and will have a significant impact on its implementation and success. This includes Section 4 (a) with the concept of forward funding. In the past, many programs for Children and Families have faultered awaiting appropriations from Congress for the current fiscal year. This is an important consideration in planning.

Section 101 (a) establishing the Office of Child and Family Services within the Office of the Secretary of the Department of Health, Education and Welfare is an important and significant advance in coordinating health services for all children. The Director of this office and the establishment of this office at the Secretary's level will permit the resources from health, education and welfare to be coordinated and applied efficiently and effectively to the welfare of the children of our land. This is a critical and important concept that will be implemented by your bill and must be retained.

The amendments under Section 506 (b) of the Federal Property and Administrative Services Act of 1949 to be amended permitting the use of federal facilities for the operation of child care facilities represents another important concept and implementation of this needed bill. It is hoped that this precedent will make available any facility which is not being utilized to its fullest extent for the purpose of expanding child care facilities in a reasonable and logical manner.

The entire Section 106 detailing the types of child and family service plan are excellent. You are especially to be commended for Section 8 which provides comprehensive services to meet the special needs of minority group children and migrant agricultural workers, to meet the needs of all children to understand the history and cultural background of minority groups, and under Section 10 the provision to employ local workers residing in communities being served by such projects. Each of these is an important contribution to the overall success of children and family services. Unfortunately, there appears to be no funds specified for training personnel in child care programs or for implementing the bill. This is one area in which a minimum per centum should be designated in the bill since it is unlikely that the regulations from HEW will provide for such training.

Section 107 (B) (8) is another significant segment in the bill in that it provides "opportunities for the direct participation of parents, older siblings and other family members in the daily activities of the programs in which their children are enrolled." This too must be specified to be implemented if the program is to be a success.

As noted above the whole Section 110 on the use of public facilities for child and family service programs is excellent. Would this include the utilization of schools? With the decreasing number of children going to school over the next decade, there should be school facilities for child care programs.

Under Section 111 (c) it is critical that this be closely supervised and implemented, i.e. that "fees collected for services shall not be used for the non-Federal share, but shall be used by the prime sponsor to improve and expand programs under the comprehensive child development and family service plan." The mechanism for enforcing this section and monitoring it should be spelled out or requested in the regulations to be developed by the Secretary.

In addition, one of the most important statements is under Section 111 (e). Again how will it be monitored and enforced that "no state or unit of general local government shall reduce its expenditures for child development or child care programs by reason of assistance under this title." As you are aware, many states have reduced the support for child development and child care programs when Title V funds became available and have not increased them as Title V funds were reduced. The manner in which this specification will be monitored and enforced should be carefully enunciated in the regulations developed by the Secretary.

The importance of evaluation as detailed under Section 206 of the bill cannot be overemphasized. The creation of an Office of Child and Family Services at the Secretary's level will permit an evaluation, coordination and description of all federal activities which effect Child and Family Service Programs. The evaluation as to their effectiveness as well as distribution will be an important contribution to our knowledge and ability to provide the best services to all children everywhere. This is an important inclusion in the Act and should assure its effective implementation.

Finally, the Section under Title III-Research and Demonstrations of the Act are detailed and excellent in their description. However there is a serious flaw in this Section in that there is no minimum per centum for research. In view of the restrictions on research funds imposed by the Secretary and the entire HEW, it would appear prudent to list a minimum per centum for this important function. It is suggested that not less than 2 per centum and not more than 5 per centum of the amounts available under Section 3 (b) of this Act for any fiscal year be designated for research and demonstrations. Again a specific per centum should be designated for training. In no way would this preclude the recommendation under Section (c) (1) (2) in utilizing other funds for the same purposes.

Under Title IV, in training of personnel for child and family services again a specific amount of funds should be designated for this purpose.

I want to express my appreciation for the opportunity to comment on the Child and Family Service bills S. 626 and HR. 2966 and to represent to you my own personal views as well as those of the Department Chairman of the Association of Medical School Pediatric Department. If there is any way in which we can be of service to you or to your committee, please do not hesitate to ask.

Sincerely yours,

Marvin Cornblath

Marvin Cornblath, M. D.
Professor and Chairman
Department of Pediatrics

MC/at
cc: Dr. Thomas K. Oliver Jr.
Dr. Philip Dodge

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September 5, 1975

The Honorable Walter F. Mondale
Chairman, Senate Subcommittee on Children & Youth
443 Russell S.O.B.
Washington, D.C. 20510

Thank you for inviting our testimony on the Child and Family Services bill S. 626.

I, Thomas C. Taylor, executive director, testify on behalf of the National Child Day Care Association, Inc., Board of Directors, staff, parents and children.

Ten years ago this month NCDCA opened its first child day care center - funded by Head Start. Today we operate 25 centers and special programs funded in various ways which serve more than 1200 children and their families annually. We believe we speak from substantial first hand experience.

We commend you for your continuing efforts for this nation's children and families. We wholeheartedly support the basic premise of bill S. 626 that "child and family service programs must build upon and strengthen the role of the family ..." We believe ours do. Child day care programs must provide not only wholesome and broad-scope education for rapidly developing children, but also actively involve parents in the process. Respect for self and members of the nuclear and extended family and community cannot begin too soon.

Some of the human tragedies now besetting the Juvenile Courts and our society as a whole might be avoided by improved early care. We believe good child and family service programs are a wise investment in both human and financial terms. In this economy more parents than ever before must work. For the future of all of us their children -our children- must have the best possible care. The approach outlined in S. 626 merits full support. The $1,850,000,000 requested seem adequate only for a modest beginning. In view of the increasing need for services and rising costs, the allocation may be inadequate by the time of approval.

Specifically, we applaud this bill for providing for:

.children up to 15 years of age,

.the training and career development of child care workers,

.the establishment of standards "consistent" with the 1968 Federal Interagency Day Care Requirements,

.the renovation and construction of facilities and equipment; and

.the use of realistic fee scales which should make good programs available for all children (No parent should have to turn down a hard earned promotion or child be denied care because the family isn't "poor enough" to qualify for subsidized care!)

Our final concern rests with the matter of sponsorship. Flexibility must be retained. What meets the needs of one family or one community may not be satisfactory for another. Uniform high standards may be met in many ways. Ideally, we should like single purpose sponsors whose sole purpose is the provision of comprehensive and developmental child care programs.

Signed: Thomas C. Taylor /kms

bcs

national association of school psychologists
OFFICE OF THE PRESIDENT

1140 CONNECTICUT AVENUE, N.W.
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(202) 872-0311

September 4, 1975

TO: The Honorable Walter F. Mondale
United States Senate
Senate Office Building
Washington, D. C. 20510

Dear Senator Mondale:

The National Association of School Psychologists is extremely pleased with the Child and Family Services bills, S. 626 and H.R. 2966 as written. You are to be commended for your efforts in providing such a well written comprehensive bill that I am certain will result in providing significantly needed services for children and their parents.

It is particularly encouraging to learn that you have provided and assured parental participation in the determination and implementation of needed services. We are also pleased that the bill provides opportunities for not only early identification of children's potential handicaps but services to prevent and ameliorate identified physical, mental and emotional handicaps.

In consideration of the millions of children and parents desperately in need of early and continued professional help, we sincerely hope that the Child and Family Services bills become a reality. Thank you for the privilege of submitting this statement for printing in the hearing record. Our Association would welcome any opportunity to help better serve the mental health and educational needs of children.

Sincerely yours,

Michael Chrin

Michael Chrin
President

MC/bm
cc: Council of Exceptional Children
National Council of Organizations
for Children and Youth
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The Largest Division of American Personnel and Guidance Association

Statement on Behalf of the
American School Counselor Association

by

Mr. Donald W. Severson
President
On Leave of Absence From
State Department of Public Instruction
Consultant
in
Counseling and Guidance
Madison, Wisconsin

on

The Child and Family Services Act of 1975
S. 626

U. S. Senate
Subcommittee on Children and Youth
Walter F. Mondale, Chairman

U. S. House of Representatives
John Brademas, Chairman
Select Subcommittee on Education

Friday, September 5, 1975

American School Counselor Association 1607 NEW HAMPSHIRE AVENUE, N.W.
WASHINGTON, D.C. 20009 PHONE AC 202 483-4633

Mr. Mondale and Mr. Brademas and Members of the Committee:

I am Don Severson, President of the American School Counselor Association and President of the Alliance of Associations for the Advancement of Education, on leave of absence from the Wisconsin Department of Public Instruction as a Consultant in Counseling and Guidance Services. It is with pleasure that I have prepared this statement and present it to your joint subcommittee on S. 626, The Child and Family Services Act of 1975.

The American School Counselor Association (ASCA) commends both of you for the outstanding work you and the committee have done in the preparation of this bill. Especially noteworthy is the extensive effort you have made to get citizen opinion on this bill. We appreciate very much your effort in this regard and the opportunity extended to the American School Counselor Association. The type of program for which it is designed has the potential for meeting the challenges of the growth and development of this nation's greatest resource--people.

It is the intent of this statement to expand with greater specificity the statement on behalf of the American Personnel and Guidance Association by Dr. Janet C. Heddesheimer to the joint House and Senate subcommittee hearing on S. 626 on Wednesday, March 12, 1975, in the Dirksen Senate Office Building, Room 4232. (A copy of her statement is attached for your convenience.) The American School Counselor Association includes a membership of 14,000 persons who work in school settings from early childhood and elementary school to the other end of the continuum in post-secondary and adult continuing education institutions and agencies. The American School Counselor Association is one of twelve divisions of the American Personnel and Guidance Association. The

39,000 counselor membership in APGA includes, among others, vocational counselors, employment counselors, vocational rehabilitation counselors, public offender counselors, school counselors, and guidance and personnel workers in a variety of other settings.

The American School Counselor Association endorses and supports the statement of the American Personnel and Guidance Association in support of the Child and Family Services Act of 1975. There are many strengths contained within the proposed legislation. There are also areas of concern to us, which we want you to expand upon. We will especially address these areas in our statement.

As counseling professionals, our primary concern is for that of the children and their families. (Copies of ASCA Role Statements for counselors in elementary, middle/junior high, secondary and post-secondary programs are attached for your information. Note especially the sections marked indicating parent involvement.) We believe this also to be the main purpose of the provisions in The Child and Family Services Act of 1975. We agree there is the need for a partnership of parents, state and local government and the Federal Government to effect maximal use of available resources to meet the needs of child and family development. The collaborative efforts of the child, family, community, and education will assist everyone to better recognize, understand, and help satisfy human growth and development needs in the emotional, physical, social, and intellectual areas.

RECOMMENDATION: We think the child and the education community must be included equally in the stated purposes.

Families and partial families must resume a more responsive and leadership role for child development. This is one of the greatest needs we have today. It is a need that can be met through the development of parenting skills to accommodate a significantly different society from that in which parents of today experienced as children.

Turfmanship and Power Struggles

With the focus on concern for the children and their families, as well as on a team approach to meeting their needs, we point out to the committee that every precaution should be taken in the final development of this legislation to prevent competition, power struggles, and turfmanship among any of the principals involved with the receiving of, coordinating of, and/or delivering of the program of services as outlined in this legislation. One of the potential strengths of this bill is the development of a team approach. This, in our view, must be protected and enhanced in every possible way.

We intend to point out for your consideration ways in which to further strengthen the intent of the programs through the use of resources and techniques we believe to have been overlooked in the drafting of S. 626.

Waste and Duplication

A variety of services are identified for delivery through the act. We believe stronger provisions need to be made for the planning and design of a program of delivering of these services. We are heartened by the apparent first attempt through Federal legislation to recognize and depart from the historical notion of providing services to and for people. We encourage you and are prepared to support you to take steps which are even more bold in the design and implementation of programs that involve doing things with people thereby assisting them in becoming the persons they are capable of becoming. "Services" offered by a variety of sources to those who may want to avail themselves of those services without a well-designed program of involvement and delivery, will not be effective in today's modern society. It is wasteful. It is duplicative. It is disjointed. In addition, it frustrates people to an extreme degree who are seeking help and assistance to meet their needs. Government agencies, educational institutions, private agencies and institutions, and families must work in greater collaboration with one another if the quality of family life is to be improved in this country. Bureaucrats within the agencies at various governmental units and levels need to be more attentive and responsive to the publics they were created to serve. They must be able to approach people with unique and different needs in different ways.

RECOMMENDATION: For the purposes of this bill to have greater potential for success, we believe it needs to be strengthened in the program development and design aspects.

People cannot begin to develop an understanding, communicate with, and/or prepare themselves to live a fuller life in isolation from it. It does little good to try to tell a child or parents of the ghetto how other people live or how they should live. Their most important need is to learn how to cope with who they are and how to make the best of what they have before they can develop those experiences into skills to help them reach their maximum potentiality. Preparation for a more fulfilling life is to experience living through a variety of experiences with others which help one to cope with circumstances that cannot be changed and to take greater responsibility and control for the direction of one's life with those circumstances a person can affect.

Equal Opportunity

The type of program outlined in The Child and Family Services Act suggests the need for facilitating change with children and their families. The most important element, then, becomes one of the kind of program provided more than on the delivery system itself or on those who become the deliverers.

RECOMMENDATION: We believe there should be equal opportunity for the public and private sectors of this country, through well-conceived and designed programs based upon developmental growth and change, to be cooperatively engaged with others in delivering such a program.

(Attached for your information is a copy of an ASCA Position Statement entitled "Counseling and Guidance Program: Staffing Needs and Responsibilities". This will illustrate the type of program development and design counselors can facilitate.) The "equal opportunity" concept is a key one here. The concept maintains the focus upon the needs of children and their families, while at the same time, providing for the organization and coordination of available expertise and resources in the given community regardless of who the deliverers are or the particular setting in which they may be working. This should minimize the self-serving interests of those who will be able to contribute to the delivery of the program and maximize the opportunities for need fulfillment on the part of children and families.

The "equal opportunity" for the eligibility of schools as prime sponsors and especially the involvement of school personnel in any partnership program at the local level is absolutely necessary for the quality and the continuity of the program. Regardless of the prime sponsorship, the key element is the program design for how the team functions in the development and operation of the program over time. Parents have delegated to schools and/or schools have assumed a disproportionate share of the responsibility for child growth and development. There must be provisions through this Act to bring about a different balance than now exists. Schools and school personnel have been doing an adequate job under the circumstances. Adequacy is not good enough! These programs must change--and they are changing.

RECOMMENDATION: The provisions in S. 626 must be expanded so as to further encourage schools and school personnel to continue to become more community oriented and participate more fully with parents and available community resources.

Think of the implications and impact of such changes within communities throughout this country. Very pointedly, but simply, this illustrates what more could be done through provisions of this bill aimed at cooperative and collaborative efforts among all resources of the community.

There are countless success stories where pupil services personnel, especially counselors, are working directly with children and their parents enhancing their normal growth and development. (Attached is a special issue: "Working With Parents", of the ASCA Elementary School Guidance and Counseling Journal, Vol. 9, No. 2.) Recently a first grade boy became quite withdrawn in his classroom behavior. His school work deteriorated markedly. The elementary school counselor began to work with him and his parents. The boy had been watching the news of the violence in Boston regarding integration. Most of those he saw on the TV screen were black. He became fearful of his teacher because she was black too. Through the assistance of this trained counselor steps were taken to cooperatively identify the need and to facilitate steps to overcome the situation.

Through the leadership and expertise of persons, such as counselors, change can be facilitated. An understanding of human growth and development on the part of such trained facilitators can assist children, their parents, and others with whom they come in contact to better understand themselves and how to cope and assume greater responsibility for their own futures. Such practical and successful programs and experience can and should become a part of every team effort in child and family service programs throughout this country.

Membership and Function of Council

We believe the Child and Family Service Council is an important component of the bill. Additional steps or guidelines need to be outlined to enhance its effectiveness and strength. We agree that one of the goals of the bill and of the Council is to develop greater self-reliance among those participating in the program.

RECOMMENDATION: A series of progressive steps need to be outlined to also assist Council members in achieving this same goal of greater self-reliance individually and as a Council.

We must remember the experience base from which most of the Council members will come. An understanding of and an ability to: communicate; organize and coordinate the work and direction of such a Council; cope with a variety of pressures, successes and failures; and, understand the needs of children and parents in their respective communities. These Council members will need experiences and training to facilitate their effectiveness. We offer that school counselors and/or other pupil service workers in most communities are in a position to be able to facilitate such training. In our view it should also be necessary for the Council to undertake a vigorous communication and information program about the services available. Children and parents will have to learn that it is all right (that it is normal) for them to seek such assistance in order for them to take advantage of them.

RECOMMENDATION: There should be more skilled and trained personnel as members of the Council.

Such personnel can be an important link among identification of needs, program design, and the delivery system. If the partnership among all of the principals involved throughout each phase of the program is not evident and strong within the Council, it will not get off the ground in the first place or it will inevitably breakdown somewhere along the way. A strong team in the Council will contribute toward stability and continuity of the program as well.

Program Continuity

Program continuity is a concern to which I will now address myself on behalf of our counselor association membership. We recognize and strongly support the need for the emphasis on positive child and family development in the early formative years. It cannot end there, however. Children and families have needs related to their normal growth and development throughout most of their lifetime. Making adjustments, coping with new and different circumstances and so forth are a normal part of growing up and family life.

RECOMMENDATION: People change, their needs change, and society changes thereby necessitating the continuous availability of programs and assistance from early childhood, throughout adolescence, and into young adulthood.

Those of us in the so-called "helping professions" are keenly aware of not only the normal growth needs of individuals but also of the external factors affecting child and family life. Death, divorce, separation, loss of job, sickness and injury, child abuse, disasters, dissertion (the list could go on) are increasingly affecting the development of our children.

School counselors in general, and elementary school counselors in particular, are showing the way in many schools for greater involvement of the school in the community and in working with parents. The child and parent(s) look to some stable, helping person to assist them in times of need. Working with the child and family recognizes the need to work with the whole child.

We do not see within the provisions of the Child and Family Services Act a strong enough recognition and financial support for development and continuous programming beyond the early childhood years. Child and family needs know no age barrier. It seems to me that having set in place a strong team effort, including the educational community, at the early childhood stages it would be natural for the program to continue in such a collaborative manner. At age five and six these children are in school and their identity focuses with school personnel. If counselors and other school personnel were contributing members of the team at early childhood the problems of transition would be minimized for the child and the parent. School and community programs would thereby be strengthened and continued. And, most importantly of all the child doesn't have to re-establish identity, trust and confidence with a totally new set of helpers.

Our experience in counseling and guidance programs with children and their parents overwhelmingly supports that it takes two to three years before a successful program has gained the respect, confidence and trust of the patrons to voluntarily accept and seek assistance in large numbers. In order to accomplish this trust it takes a lot of planning, communicating, and working with the child and parent(s). It just does not make any sense to allow and/or create a situation where such relationships must be started all over or redeveloped.

All Children and Families

Children and adults have the same basic human needs regardless of race, creed, ethnicity, or economic means. Not always are children of economically disadvantaged families in need of assistance. Sometimes they have more love and caring than children of very wealthy families. Some of these families are in need of a great deal of help too.

RECOMMENDATION: There is a need for assistance to families regardless of income or other factors the lack of or too much of which may be disadvantageous to those persons affected.

We urge the committee and Congress to also consider ways in which programs can be supported for all children and families who may be able to benefit from assistance provided through this Act. Support should not be designated as exclusively to that of the "disadvantaged". Perhaps you would give consideration to free service under certain economic and accessibility conditions and a contributory service for others under certain conditions. We have a great deal of evidence to support child and family needs regardless of socio-economic or other status in life.

We commend this committee for its foresight and emphasis upon forward fundin of the provisions of this bill. We wholeheartedly agree and support the contribution this concept makes to the possibility of effective planning and efficient implementation of federally financed programs.

Want Help

Most parents and children want help. Many are afraid to ask. Many others don't know how to ask. The provisions of this Act are so very much needed to get a start toward enhancing the value of individual differences, the quality of family life and the importance of the family unit. We each have our individual differences yet we are very much alike in our needs for love, understanding, feeling of personal worth, positive self image, respect of and for others, and feelings of belonging and security. The ways in which we recognize these qualities in each other and how we go about helping each other to create oneself within the framework of the family and the larger society is crucial.

Parents need coping skills as well as their children. We really can't afford to work with one and not the other. The development of parenting skills and parent effectiveness has far-reaching implications in the provisions of this Act.

RECOMMENDATION: We do, however, want the bill to recognize the contributions that are being made and can be made by counselors and others to facilitating the role of parenting and the family.

Programs fostering parent understanding of Child growth and development have met with resounding interest and success in a variety of communities throughout the United States. Counselors have been able to do this on a very limited scale, but the potential is there. A very great impact can be made through provisions of this bill which reflect the need for these programs and the combined efforts and resources of the total community--including counselors and other school personnel.

Personnel Selection and Training

I shall turn now to the final area upon which I will make comment and recommendation. This area deals with the preservice and inservice education and training for personnel. The competencies and effectiveness of the personnel who become part of the delivery system of the programs will heavily influence their success.

RECOMMENDATION: The selection criteria, training techniques and methodologies and level of competency cannot and must not be compromised.

The persons selected for roles in the program delivery system must be well trained and thoroughly competent people. The programs simply cannot be used for a training ground for a variety of aides, paraprofessionals and others. Personnel at these levels must be included and are necessary to the effective and efficient delivery of the overall program. High level competencies of personnel in the skill levels necessary to the functions of the program will establish credibility with the children and families who will decide to seek assistance and/or continue their participation in the program. Equally important to the professional and paraprofessional competencies will be the abilities of the program staff to get along with people and inspire the confidence and trust of children and families. Counselors, other school personnel and some community resources have the expertise and practical experience to facilitate preservice and inservice training. Close linkages with vocational-technical institutes, community colleges and colleges and universities will assist prime sponsors in the training of qualified personnel for Child and Family Services Programs.

Career Development

Special citation was given in S. 626 (Section 102(b)(4) - page 10) to preservice and inservice--"especially education and training for career development and advancement". We support this provision as an important element of responsibility of the total leadership team in such programs.

RECOMMENDATION: We strongly urge the committee to include career development as an important purpose of the program of assistance with children and families.

Although school staff members are extremely important in assisting children in their career development, there are other persons who also provide valuable assistance. They include parents, peers and other community members.

Without question parents can and should be the most influential role models and counselors to their children. Having some measure of direct control over the environment in which their children have been reared, they have the unique opportunity to expose them to experiences appropriate for self-fulfillment. As their children enter public education, parents share, but do not give up, the responsibility for their development. Parents who take full advantage of the information and assistance given them by counselors and other school staff members concerning the interest, aptitudes, failures and achievements of their children, can use this background of information to assist with the career guidance and counseling: discussion of work values developed as a result of past experiences and of the consequences they have experienced; discussions of the economic condition of the family as it applies to the children's education and training needs and assistance in planning a course of action; help in using the knowledge, experience, and services of relatives, friends, fellow workers and other resources in exploring the world of work and in planning and preparing for their children's role in the work society; provision of a model and counseling to their children during critical developmental periods of their lives in an attempt to have children establish and maintain positive attitudes towards themselves and others; exemplification of the attitude that all persons have dignity and worth no matter what their position in the world of work;

provision of situations that allow children to experience decision-making and to accept responsibility for the consequences of their decisions; maintenance of open communication between school and home so that the experiences of both settings can be used in meeting student needs; and provision of opportunities for children to work and accept responsibility of the home and community. (We are attaching a copy of a Joint Position Paper on "Career Development and Career Guidance" prepared by the National Vocational Guidance Association and the American Vocational Association.) We commend to you the guidance and counseling model as one in which facilitation of child and family growth and development may be enhanced and strengthened. This can and must be done through collaborative efforts among the child, parent(s), school and all community resources available.

ASCA Suport

In conclusion, I take this opportunity to offer you the assistance of our association and its membership in the further development of S. 626; in the passage of this bill by Congress; and, in the implementation of its provisions to meet the needs of children and their families. We are prepared to give you back-up information supporting our statement to you. Additionally, we are prepared to offer you any technical assistance you may request in developing language in the Act in support of our recommendations to the Committee.

On behalf of the American School Counselor Association, I express my appreciation for the opportunity to present this statement to you and members of the Committee.

ASCA PS No. 74-03 November 25, 1974

The Largest Division of American Personnel and Guidance Association

COUNSELING AND GUIDANCE PROGRAM:

STAFFING NEEDS AND RESPONSIBILITIES

Introduction

This position of the American School Counselor Association describes the elements of a comprehensive and developmental guidance and counseling program and the criteria upon which the quantity and responsibilities of qualified, differentiated staff members is based. The ASCA statements of counseling role and function for the elementary, middle/junior high, secondary and post secondary settings are an integral part of the design and implementation of guidance and counseling program.

Philosophy

"Who am I?", "Who can I become as a person?", and "How can I best contribute to society?" are questions which guidance and counseling programs help all individuals to answer. In their design and operation, through the curriculum and through specialized approaches, guidance and counseling programs exist to improve the learning environment by involving students, staff, parents, community and others who influence the learning and development of the persons served by the program.

Through individual and group contacts over a period of time the counselor has a major role in helping all persons develop more adequate and realistic concepts of themselves, become aware of educational and occupational opportunities and to integrate their understanding of self and opportunities in making informed decisions.

Program Goals

A guidance and counseling program provides for direct involvement of and service to students, staff and community in order to facilitate achievement of the following program goals:

Assist persons in developing

1. A better understanding and acceptance of themselves; their strengths and limitations; aptitudes, needs, values, interests, and worth as unique individuals.
2. Interpersonal relationships on the basis of mutual respect.
3. Problem-solving and decision-making skills.
4. And accepting increased responsibility for their educational, occupational and avocational development.

(continued)

American School Counselor Association 1607 NEW HAMPSHIRE AVENUE, N.W.
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Standards

These standards are set forth in a manner which allows local school districts, institutions, agencies and others to design and implement guidance and counseling programs consistent with the unique needs found within each setting.

Program:

1. There is a written statement of objectives developed as a counselor responsibility, and with the involvement of appropriate others, specifying the overall guidance and counseling program as it involves and relates to the needs of the person in the school, institution, agency and community.
2. The basic program of guidance and counseling involves the process of consulting and coordinating services. The program is comprehensive and developmental and is implemented through the curriculum and through specialized approaches. Orientation, information, appraisal, placement, follow-up, follow-through, referral, and research activities are included in the program.
3. There is evidence that all persons throughout the school, institution, agency and community have continuous opportunity to participate in the guidance and counseling program.
4. There is evidence that the guidance and counseling program is systematically planned, implemented and evaluated.
5. The guidance and counseling program is continued on an extended basis during periods when classes are not in session.
6. The guidance and counseling program is community oriented, serving not only students enrolled but also pre-schoolers, dropouts, graduates and other community citizens.
7. Counselor taught or initiated mini-courses in decision-making, value clarification, study skills, and/or similar units are offered.
8. The program serves three-to five-year old children and their parents where elementary school settings exist.
9. The guidance and counseling program provides other innovative service(s) or activities which are designed to meet unique needs of persons.

(continued)

Staff:

The American School Counselor Association has, in the past, given considerable thought and attention to the value of specified counselor-pupil ratios which are necessary to achieve the basic objectives of guidance and counseling programs. The absence of specified ratios in these standards should not be interpreted to mean that ratios cannot still serve as useful guides nor that they should not be maintained. ASCA holds the position that appropriate staff shall be employed to implement a guidance and counseling program designed to meet the needs of the persons to be involved in the program.

1. The guidance and counseling staff is qualified and appropriately certificated/licensed according to State Agency standards.
2. The guidance and counseling staff is responsible for the design, implementation, and evaluation of the services and activities prescribed in the program.
3. Professional, secretarial and/or para-professional staff are adequate in numbers to meet the objectives of the program.
4. Provision is made for staff to attend and/or participate in intra- and inter-professional meetings and activities within and outside the state.

Facilities:

Appropriate and meaningful guidance and counseling activities with individuals and groups takes place in a wide variety of settings, the specific environment often being determined by circumstances. There are, however, continuing student, program and staff needs in which privacy and confidentiality of conversation and records require special counseling facilities.

1. Each counselor is provided with pleasant, private quarters conducive to conferences of a confidential nature and adequate in size to accommodate three to five persons.
2. The counseling facilities are located in an area readily accessible to students and others.

(continued)

3. Each counselor's quarters is equipped with adequate telephone service.

4. A conveniently located area adequate for group guidance and counseling activities is available.

5. Adequate provision is made for the storage or display of all records and materials used by the counselor(s) in carrying out the guidance and counseling program.

6. Career resource center(s) are established and appropriately staffed to facilitate use of career awareness, exploration, planning, preparation and progression materials, equipment, and supplies.

Materials and Equipment:

1. There is adequate budget for purchasing, maintaining and developing the materials and equipment necessary to achieve the objectives of the guidance and counseling program.

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NATIONAL ASSOCIATION OF STATE MENTAL HEALTH PROGRAM DIRECTORS

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Executive Director

September 4, 1975

Honorable Walter F. Mondale, Chairman
Senate Subcommittee on
Children & Youth
and
Honorable John Brademas, Chairman
House Select Subcommittee
on Education

Dear Senator Mondale & Congressman Brademas:

The National Association of State Mental Health Program Directors appreciates your invitation to submit a statement on the Child and Family Services bills, S. 262 and H.R. 2966. These bills have been reviewed by members of NASMHPD and members of the State Mental Health Representatives of Children and Youth, a division of NASMHPD.

The members of the Senate and House Subcommittees responsible for the preparation of these bills are to be congratulated on their perceptive recognition of the special needs of the handicapped (especially young handicapped children). The ten percent set aside for special activities relating to handicapped children highlights the subcommittees' awareness of the special needs of these children.

We urge at this time that these funds be targeted for use against the genuine, legitimate costs incurred in providing developmental services beyond and in addition to these costs which provide for minimal standards of service for all children served under the provisions of these bills, handicapped as well as non-handicapped.

The special emphasis placed on the participation of families in the planning of and management of children and family services is a most commendable aspect of these bills. The most remarkable feature of these bills, however, is the identification of the need for a fuller Federal committment to the development of additional prevention, early diagnosis and early intervention projects for all children.

While concurring with the need for a sizeable increase in Federal participation in children and family services, especially services to families which include handicapped children, NASMHPD would like to highlight several limitations of S. 262 and H.R. 2966.

COOPERATING AGENCY — COUNCIL OF STATE GOVERNMENTS

First, if enacted, this legislation will invest almost exclusively in the Secretary of HEW, the responsibility for determining the appropriateness of locally delivered children and families services. Thus, it would minimize the role of state governments and override their traditional role in determining human priorities and deciding within broad Federal guidelines how best to allocate available Federal, State and local service dollars to meet those priorities.

As former Sectetary of HEW, Casper Weinberger, noted in his statement before a joint hearing of the Subcommittee of Children and Youth, the Committee on Labor and Public Welfare of the United States Senate and the Subcommittee on Select Education and Labor of the House of Representatives on Tuesday, July 15, 1975:

> In lieu of the Governor or the Legislature or the "single State agency" planning and allocating these resources and supervising their expenditure, this bill would make it the responsibility of the Secretary of HEW:
>
> --- to determine who, among localities or competing local agencies, should be a "prime sponsor" of a child and family services project;
>
> --- to determine whether local sponsors are overlapping in their service delivery areas or duplicating one another; and,
>
> --- to determine whether, when and to what extent a State should step in to serve as a prime sponsor in an area where local governments or voluntary agencies do not take it upon themselves to operate child and family service programs.

In addition, the Secretary of HEW would be responsible for reviewing the annual service plans of the thousands of prime sponsors to insure that each is adhering to Federal standards for program quality and fiscal accountability.

In order to satisfactorily exercise these responsibilities, the Secretary of HEW will be required to create a vast Federal administrative structure to plan, review, coordiante and monitor the services developed under the provision of these bills. To quote again from the remarks of Mr. Weinberger before the joint hearing of these bills:

> In short, this proposal as now framed would demand a veritable army of Federal bureaucrats in Washington and in the Department's ten regional offices to perform the kinds of programmatic planning, coordinating and monitoring activities that belong more appropriately under the aegis of State and local governments, and which indeed are being done by those governments right now.

Secondly, the pending legislation would duplicate a wide-ranging variety of existing programs directed towards children and families without satisfactorily attempting to coordinate these programs.

For example, the proposed program would overlap programs administered under Title XX of the Social Security Act; the WIN program; Head Start, Title I of the Elementary and Secondary Education Act; Medicaid, especially the Early Periodic Screening Diagnosis and Treatment program; Maternal and Child Health; Community Mental Health Centers; Neighborhood Health Centers; Developmental Disabilities; and Crippled Children's programs.

In light of these limitations, NASMHPD strongly urges the joint subcommittees to redefine the locus of responsibility for determination of relevant service needs, the distribution of funds available under these bills, and the monitoring of Federal standards for program quality and fiscal accountability from the level of the Secretary of HEW to the level of the state agency designated by the governors of the individual states.

The lack of a requirement under the proposed provision for a coordinating state plan will likely serve as a deterrent to the implementation of these bills: the development of coordinated services to children and families.

Therefore, in conjunction with the proposed shifting of responsibilities for the determination of priorities and the administration of funds available through these bills from the Federal to state level, NASMHPD urges that provisions be included requiring state governments to prepare an annual coordinated children and families services plans. Such plans should be the basis for the designation of Federal, State and local prime sponsors.

Let there be no misunderstanding, NASMHPD concurs with the intent of these bills to provide: (a) more and (b) better coordinated services to children and families. But, in our opinion, in endeavoring to provide the former, these bills will not satisfactorily secure the latter. For this reason, NASMHPD strongly urges the House Select Subcommittee on Education and the Senate Subcommittee on Children and Youth to redefine the relationship between federal, state and local children and family service authorities, included in the proposed legislation provisions which will:

(1) require the preparation of an annual state plan for coordinating children and families services to be reviewed by the Secretary of HEW;

(2) assign the responsibilities to designated state agencies for allocation of funds under this act based on the services and early priorities identified in the state plan; and,

(3) assign the responsibilities to the designated state agencies for ensuring that prime sponsors are adhering to Federal standards for program quality and fiscal accountability.

In closing, we reiterate our recommendations that the ten percent set aside funds be targeted for use against the genuine excess cost incurred in providing services to handicapped children participating in regular projects provided for in these bills.

Thank you again for your invitation to submit a statement on the Child and Family Services bills and for your continuing interest in the special needs of handicapped children.

Sincerely,

Paul R. Ahr

Paul R. Ahr, Ph.D.
Assistant Commissioner for Program Development, Evaluation and Training
Dept. of Mental Health & Mental Retardation
State of Virginia
and
Chairman, Task Force on Child and Family Services Act for the State Mental Health Representatives for Children & Youth -- A division of NASMHPD

NCFR

National Council on Family Relations

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August 23, 1975

Senator Walter F. Mondale
Chairman
Senate Subcommittee on Children and Youth
The United States Senate
Washington, D. C. 20510

Representative John Brademas
Chairman
House Select Subcommittee on Education
The United States House of Representatives
Washington, D. C. 20510

Gentlemen:

We appreciate your invitation to comment on the Child and Family Services bills, S.626 and HR.2966, on behalf of the National Council on Family Relations.

Throughout the United States we hear continuous and emphatic statements concerning the importance of the family to our citizens and to our society. At National Council on Family Relations headquarters, we are increasingly called upon for information, programs, and other supportive services for families, especially for the strengthening of the parental roles of Americans. We have come to believe that a most crucial test of the survival of our society is its ability to produce more secure, better informed, and more effective parents. The need for this kind of support, and the form that it might take, at least in educational agencies, is outlined in our statement on parent education, as follows:

Statement on Parent Education

> Parent education is purposive training for the parental role and for learning appropriate responses to children as they grow and develop. Much research supports the fact that the parent-child relationship is of infinite significance in the lives of both, but particularly in the life of the child. Children can no longer learn all the dimensions of this role from the parent model alone. For this reason, it has become necessary for schools and

> community organizations to respond to this need and help prepare individuals for all aspects of parenting. In no "profession" does one attempt to do a job well without learning the skills necessary to the success of the job, and so for parenthood these varied skills can also be learned.
>
> Education for parenthood is justified today because individuals need a great deal of help in order to fulfill their roles as parents and maintain the family as a vital basic unit in America and also because children desperately need a counter-balancing agent against the large amount of societal input, mainly through the mass media, which negates the nurturing, understanding, and empathic output required for parenting. The educational system in the United States has only recently begun to recognize its obligations to prepare young people for their parenthood roles as partial prevention for the kind of frustration that often culminates in child abuse and child neglect. Good parent education will include knowledge about the effect of children on marriage and the specific kind of marriage on children, parental and child roles, effective guidance and discipline including possible causes and prevention for child abuse, how to select good child care when parents must work, the effects of the mass media on child rearing, the effects of divorce on child rearing and the role of step parents, basic child growth and development from infancy through adolescence, the grandparenting role, how to handle crisis - death and illness with young children -- and how to find community resources to help individual families meet their family needs and concerns.
>
> Education for parenthood should be seen primarily as preventive education, and it can be carried out by a variety of community agents.

It is our belief that your Child and Family Services bills are intelligent and efficient responses to the national recognition of the need for support for the American family; while everyone seems to be talking about this need, your bills would do something constructive for family life. We applaud the comprehensive nature of your proposed attack on family ills, and although we know that many families need and want such services, we think that it is proper for your bills to offer the help only to those families which choose to use it. Further, we are convinced, on the basis of our many years of observation of child and family improvement programs, that the "partnership of parents, community, private agencies and State and local government with appropriate supportive assistance from Federal Government" in conjunction with public schools and colleges is the kind of partnership delivery service that can best meet the needs of today's families.

Sincerely,

Richard K. Kerckhoff
Richard K. Kerckhoff, President

Florence G. Kerckhoff
Florence G. Kerckhoff, Parent Education Consultant

R. K. Kerckhoff, Ph.D., is Professor of Family Development, Purdue University.

F. G. Kerckhoff, M.S., is Associate Professor of Parent Education and Child Development, and is Director of the Child Development and Family Life Laboratories, Purdue University.

STATEMENT BY CITIZENS' COMMITTEE FOR CHILDREN TO JOINT HEARING OF THE SENATE SUBCOMMITTEE ON CHILDREN AND YOUTH, THE HOUSE SELECT SUBCOMMITTEE ON EDUCATION AND THE SENATE SUBCOMMITTEE ON EMPLOYMENT, POVERTY AND MIGRATORY LABOR, JUNE 1975

I am Henry Saltzman, Executive Director of Citizens' Committee for Children of New York, Inc. CCC is a private voluntary organization made up of professional and lay members concerned with improving services for children in New York City. CCC, which accepts no public funding and is completely supported by individual contributions and foundation grants, has a 31-year history of recognition of the need to serve the child within the context of the needs of the family as a whole. Thus we are pleased to respond to your request for our reaction to #HR2966 and S626 by applauding the fact that they call for provision of "services to children and their families."

The language of the bills which says that "it is essential that the planning and operation of programs be undertaken as a partnership of parents, community, private agencies and state and local government with appropriate supportive assistance from the federal government," meets our criteria for effective day care. We are also pleased with the call for a variety of quality child and family services with "priority to those pre-school children in families with the greatest needs, in a manner designed to strengthen family life and to insure decision making at the community level, with direct participation of the parents of the children served and other individuals and organizations in the community interested in child and family service (making the best possible use of public and private resources) through a partnership of parents, state and local government and the federal government..."

We feel this proposed legislation represents a giant step in the right direction by focusing national policy on preserving and enhancing family life.

More specifically, we would like to comment first on the Section 104 of the Child and Family Service bill which calls for prime sponsorship to be vested in states or localities except where they do not apply or fail to qualicy. Private or public non-profit agencies may be funded directly only under specified circumstances or they might qualify as project applicants. The wording os busection (f) suggests that they could serve as prime sponsors only if the prime sponsor practices discrimination against minority groups or economically disadvantaged children.

We believe that there are 3 important factors to be considered in designating the prime sponsor. The sponsor should be able to:

1. The sponsor should be able to promote healthy competition among groups representing diverse approaches to day care;

2. The sponsor must insure that no one profession or discipline will skew the focus of the day care service;

3. The sponsor should insure that the role of the Child and Family Service Councils in the development of day care services will be a strong one. These councils should not be bound by the perception and expertise of any particular service sector.

In selecting or establishing an agency or agencies to administer and coordinate child and family service programs, we suggest that the prime sponsor should give first consideration to agencies which are not themselves service providers. While such service providers as Boards of Education, voluntary and private agencies may all be project applicants, the administering agency should not favor a single service strategy but should be able to view and select among diverse types of care with a high degree of objectivity.

One administrative roadblock to the development of sufficient day care services, even when funds are available, has been the dispersion of licensing authority among several departments. We strongly recommend that the bill include provision for outstationing to the designated administrative agency personnel from those departments with the expertise to determine eligibility for licensing.

Lastly, we feel that the strength of the programs will untimately depend upon the active participation of Child and Family Service Council members. In order to enlarge the pool of competent people who could and would serve, we suggest that council members receive reimbursement for transporation, loss of income and an honorarium.

We would also like to question the conditions set forth in the present bill which place on the Council persons who are involved in operating programs. We fear that this might prejudice their view of standards and policies for which the Council is responsible. We suggest that this committee substitute provisions which state that no one directly concerned with operating programs should sit on the Child and Family Services Council thus avoiding any conflict of interest. Thus, we would favor Councils dominated by parents and by representatives of concerned groups who have no vested interest in any particular operating program. The Councils can easily develop other mechanisms to enable them to receive input from such groups.

We would now like to discuss the provisions of the bill in the context of the eight principals approved on May 22, 1975 by the CCC Board of Directors.

1. A service which helps to meet the economic and child rearing needs of the family. The bill clearly recognizes the need for such a service in specifying that priority is to be given to economically disadvantaged children and to children of working mothers and single parents. The bill further says that funds may be used for "other health, social, recreational, and educational programs designed to meet the special needs of children and families," "social services to families including counseling and referral," "food and nutritional services," "diagnosis, identification, and treatment of visual, speech, medical, dental, nutritional, and other physical, mental, psychological, and emotional barriers to full participation in child services programs." These and other similar provisions certainly seem to meet the CCC definition of "child rearing needs of the family."

2. A service which involves parents in all phases of its operation to themaximun degree feasible. Section 102, subsection (c) calls for the establishment and maintenance of a parent policy committee to be composed of parents of children served by the program, such parent policy committee to participate in the development and operation of the program; regular and frequent dissemination of information to assure that parents of children served by the program are fully informed of program activities, and regular consultation with the parents of each child regarding the child or children's development, with ample opportunity for such parents to observe and participate in their child's activities. These provisions, which underscore the vital role that parents play in child rearing, are fully consistent with CCC criteria.

3. A service which provides a learning experience in which the child is helped to develop fully. While learning experiences in general are not described in the bill, there are several references to educational components in day care, after-school and summer programs and programs designed to extend child care gains (particularly parent participation) into kindergarten and primary grades. Citizens' Committee would like to suggest that the definition of "learning experiences" be expanded to include "development of language, self-image, physical well-being and social relationships during these formative years."

4. A service which includes ancillary supports. In describing this criterion, Citizens' Committee has said "It is desirable that the day care providers assist the family to understand and reinforce the programs' activities and objectives. It is also desirable that the providers be sensitive to the family's needs and where possible offer supportive services or make appropriate referrals to other community agencies. Providers should seek to understand the inter-relationship between the healthy growth of the child and his family's well being." While the bill includes provision for ancillary services including medical, social, nutritional, recreational and educational services and includes family involvement, it lacks language calling for continuing interrelationships among the day care providers, the family and the community resources. It seems to us that it would strengthen the provision of these services to the family as a whole if the wording of the bill specified such interaction since the day care provider must understand the individual family's needs in order to serve as a referral source to the most appropriate ancillary services.

5. A service which assures the child a safe, healthful and pleasant environment. Section 202, subsection (a) describes standards for licensing child and family services facilities as standards which should "deal principally with these matters essential to the health, safety, and physical comfort of the children." We would suggest that the phrase "and to a pleasant environment for the children" be added to this section.

6. A service accessible to all. Section 106, subsection (b) specifies that the child and family service plan shall set forth a program to provide services "only for children whose parents request them" and then says that minority groups, the economically disadvantaged, and children who have not attained six years of age shall receive priority as shall children of working mothers and single parents. Subsection (6) then "provides that, to the extent feasible, each program within the prime sponsorship area shall include children from a range of socioeconomic backgrounds". This correlates closely with the CCC description of a quality day care service which says "if priorities must be established greatest consideration should be given to those with the most pressing social and economic needs."

7. A service with flexible hours and a variety of components. As the bill is presently worded it does call for both part and full day care, in homes or centers, and with a variety of components. What is lacking and is included in our explanation of this item, is, "resources should be available for infants, after school, and drop-in and night care, and appropriate in-home arrangements that meet family needs." It seems essential that comprehensive family and child care service include this wider variety of components in order to meet the full range of family needs and to encourage development of day care arrangements which may be more cost-effective than group day care in some situations.

8. A service that meets quality standards. CCC calls for offering "on-going opportunities for staff training and development at all levels." Sections 401 to 404 deal with the training of personnel for child and family services. Recognizing that one of the major barriers to quality child care is the lack of sufficiently trained staff, the bill singles out this entire area for training at all levels -- post-graduate for certified teachers; retraining of existing personnel, pre-service and in-service training "for teaching, management, supervisory and administrative posts in childhood programs; help for parents and high school students to understand and practice sound childcare techniques;" etc. Underscoring this concern for the training of personnel is the authorization of a separate appropriation for training.

In summary, if the provisions for prime sponsorship and administrative authority are amended to favor selection of agencies which do not provide service, and if an honorarium is made available to Child and Family Service Council members, Citizens' Committee for Children of New York believes that the bill would meet our criteria for Child and Family Service programs. We would also like to urge the joint committee to consider three other additions to these bills:

1. Expansion of the description of a total learning experience to include development of language, self-image, physical well-being and social relationships.

2. Some stress on the need for day care providers/family/community resource interaction in order to provide better referral services; and

3. Extension of the variety fo components to be offered to include such items as infant care, drop-in-care, night care and in-home care.

We would also like to urge the committee to ask the Department of Health, Education, and Welfare which must issue the implementing regulations, what it plans to propose. The Department's response might disclose weaknesses which this committee would have time to clarify before voting on the bill. The committee might also investigate Departmental plans for disbursing set-aside funds such as those for the handicapped to ascertain whether H.E.W. plans coincide with the intent of Congress while there is still time to write more specific provisions into the bill. Thank you for this opportunity to express CCC's opinion on this legislation.

American Montessori Society

ams news

175 Fifth Avenue, New York, N. Y. 10010

EXTRA May, 1975

COMPREHENSIVE CHILD AND FAMILY SERVICE BILLS
MONDALE — S 626 BRADEMAS — HR 2966

Probably only the generation of massive community support can ensure passage of these bills which seek to upgrade and expand the nation's child care services. Present facilities for day care and child development programs serve about 1,000,000 children although there is a need to care for over 6 million children under six whose mothers are already in the labor force and an unknown number of children under six whose parents would like them to be in such programs.

The bills, designed to "maximize parent control and strengthen family life" authorize $1.85 billion over a four year period, with the first two years providing $350 million for training, planning and technical assistance and $1.5 billion over the last two years for program operation. Service, provided on a voluntary basis, would give priority to preschool children with the greatest economic and social need. Those from families with incomes under $8100 would have free child care with others to pay according to size and income of family. "Prime sponsor" (responsible for delivery), may be a state, locality or public or private non-profit agency and will establish a Child and Family Services Council of which half must be parents of children being served, and will help to develop Child and Family Services. Funds are planned for projects that offer part-day or full day child care, in-home and in-school service, as well as information, consultation, and referral services, prenatal and other medical care, food and nutritional services, and cultural development programs.

The original concept of the bill is threatened by the position taken by the American Federation of Teachers and related unions who are aggressively demanding that the Family Services idea be dropped from the bill's title, and that the public schools be made the prime sponsors for children two and a half or older. " we believe that early childhood education is a job for the public schools, we believe that public schools should be the presumed prime sponsors for all programs, particularly those servicing children of 2½ or 3 years of age."

Child Care specialists unite in disputing the position taken by the powerful A.F.T. In the opinion of Elizabeth S. Hirsch, Ph. D. of CUNY City College's Department of Elementary Education, "Early Childhood Education is a specialized field requiring differentiated preparation. As the child population in upper grades decreases and teachers become under-utilized, it will become increasingly tempting to staff early childhood classes with personnel whose only preparation is that of seniority in the system. As a specialist in Early Childhood, I urge you most seriously not to allow expediencey in school management and employee policies to damage little children in their most impressionable years." One Day Care group states "We are solidly opposed to any takeover by the public school system whose record of achievement falls far below the day care program's sensitive and constructive approach to early childhood education."

AMI USA News points out "In most major cities school buildings are too large and imposing to provide emotionally secure transition from home to day care. If empty classrooms are used even the most superficial aspects of the environment are inappropriate. But most important to this environment, of course, are warm adults trained to meet the special needs of children in day care. Separation from the home and family brings with it specific emotional needs which staff must be — by nature and by training — capable of meeting."

Joan Lawler, AMS Vice President for Schools Development and Director of the Sussex County Day Care Center, states "We must raise our voices in protest and join with other child care advocates who see the dangers in the A.F.T. approach. We are the experts, those of us who have been involved in pre-school programs for years. The public schools lack expertise in this area. Mr. Shanker's interest in early childhood education corresponds curiously with wide-spread unemployment of public school teachers and shrinking enrollment in some school districts resulting in empty classrooms.

"The opportunity now exists, in connection with this pending legislation, to bring your program to the attention of your national representatives. We need to raise the visibility of Montessori education and project our programs as models for early childhood education."

Your national representatives and the proponents of these bills would like to know your opinion. They may be reached at the Senate Office Building and the House of Representatives, Washington, D.C. 20515.

Statement of
Odessa Komer, Vice President
United Automobile, Aerospace and Agricultural Implement
Workers of America (UAW)
to the
Senate Subcommittee on Children and Youth
and
House Select Education Subcommittee on
the Child and Family Services Act of 1975

Mr. Chairman, my name is Odessa Komer, a Vice President of the International Union, United Automobile, Aerospace & Agricultural Implement Workers of America--UAW. I am pleased to have this opportunity to express the views of the UAW on the important legislation before you.

I know it is not going to come as a shock when I say the UAW strongly supports the proposed Child and Family Services Act of 1975 (S. 626 and H.R. 2966), introduced by the distinguished chairmen of these two subcommittees, Senator Walter F. Mondale and Congressman John Brademas, and cosponsored by many of your colleagues. We, together with numerous other organizations, have actively participated in the coalition of groups outside of Congress which supported the 1971 child development legislation vetoed by the former President. We wish to commend you for your determination in pushing ahead with this new bill which, in our judgment, has been refined to meet the only substantive questions raised in connection with the earlier vetoed measure.

We believe to this day that the veto of the child development measure as part of the legislation to extend the anti-poverty program was one of the most ill-advised and incomprehensible legislative acts in an Administration in which we found much to criticize. We still have difficulty understanding that senseless veto unless it is examined in terms of pure politics. And it was the worst kind of politics because of the cost to America. Because of the veto, we have lost precious time in the implementation of a comprehensive child development program. The program proposed in the vetoed legislation was needed then, and it is even more needed now.

We are mindful of the position stated by President Ford with respect to new programs. He may follow through with his threat to veto the new program you are proposing. We would hope, however, that he would recognize the great importance of this proposal to the people of America and would make an exception in this case. There cannot be any question about the desirability of a much greater level of federal investment to meet the basic needs of families and children. The program proposed in your legislation _is_ needed--desperately needed by the children and families of America. I know we don't have to cite the statistics on the growing number of families in our nation in which both parents, or the only parent, work outside the home. Your subcommittees have developed the statistical case very persuasively. The social case for such a program has been obvious for years to anyone who cares to look.

It accomplishes absolutely nothing to argue, as some do, that the parent should be at home with his or her children. We certainly would not argue that in any case. But the fact is that it is not financially possible in many instances, and in others, that is not the option selected by the parent or parents. As a nation, we can make no sounder investment of federal dollars than to assure that children of working parents--indeed, children generally--have available to them in their early childhood years the kind of high quality developmental services which would be provided by a program such as that proposed in your bills. Early childhood experts agree that the early years of life are the most important in determining the future development of the individual. Yet it is precisely in those early years where the federal investment has generally been most deficient.

Federal programs are available, as indeed they should be, to assist elementary and secondary school students, young men and women in higher education and various categories of special education; we have programs for older Americans, veterans, homeowners, community development, housing assistance, health assistance, and on and on. But what about the federal investment in early childhood programs.

There has fortunately been increasing recognition of the need and in recent years, through programs such as Headstart and Title XX of the Social Security Act, the federal government has assisted in providing day care for children from disadvantaged families and children of working parents. But the scale of federal investment--given the overwhelming unmet need--is paltry. Your bills would start us on the road toward making up for the precious time we have lost.

If anything, we believe your bill is too modest in its authorization of appropriations. With the experience we have had, we surely can wisely spend much more than $1.8 billion over the next three years in the early childhood area. Given the current budgetary situation, however, we would support the funding level you recommend on the theory that you have to walk before you can run.

We wish to make one or two specific observations about the legislation.

First, we recommend that large profit-making day care operations be denied participation in the program. We recognize that you attempt through quality control to assure that all program operators will meet standards which would probably have the effect of ruling out participation by the most objectionable profit makers. We believe you should go further, however, and simply write into the bill a prohibition on the participation of the large proprietary for-profit day care operations. This improvement in the bill is badly needed.

We strongly support the parental involvement provisions of your bill as well as your fee schedule and the set-aside of funds for enforcement of standards and licensing. The family-oriented, community-based approach of your bill, together with the many other positive features retained from the earlier vetoed legislation, lead us to the firm conclusion that this measure deserves the strong and enthusiastic support of all who care about the welfare of children in America. The UAW is pleased once again to lend its voice to the chorus endorsing the concepts in your bills.

Because the delivery system to be used in any child and family services program has become something of a controversy, we wish to make our position clear on this point. The UAW agrees most emphatically with the approach of your bill making responsible units of government--local, state or combination of units of government--the prime sponsors in most instances.

You may recall that we communicated our views on this issue some weeks ago in letters addressed to the Chairmen of both of the Subcommittees holding these hearings. The letters, dated May 11 and signed by our Legislative Director, 5.

Jack Beidler, took note of the developing controversy over the prime sponsorship issue and reiterated our support for the approach recommended in your bills. We believe strongly that you are correct in your position, and we hope you will not be swayed by the arguments of those who have suggested--unwisely, we think--that public school systems be the presumed prime sponsors in child development programs. Our letter explains why we take this position, and I ask that it be included at this point in our statement.

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE & AGRICULTURAL IMPLEMENT WORKERS OF AMERICA—UAW

LEONARD WOODCOCK, PRESIDENT
EMIL MAZEY, SECRETARY-TREASURER

VICE-PRESIDENTS
PAT GREATHOUSE • KEN BANNON • DOUGLAS A. FRASER • DENNIS McDERMOTT • IRVING BLUESTONE • ODESSA KOMER • MARC STEPP

IN REPLY REFER TO
1125 FIFTEENTH STREET, N. W.
WASHINGTON, D. C. [illegible]
PHONE: [illegible] 296-7484

May 11, 1975

Hon. Walter F. Mondale
U.S. Senate
Washington, D.C. 20510

Dear Senator Mondale:

We have read with more than passing interest the statement recently adopted by the AFL-CIO Executive Council on the subject of early childhood programs. There is much in that statement which the UAW agrees will be essential components in the kind of comprehensive child development and family services legislation we hope the 94th Congress will enact.

The UAW does not concur, however, with the recommendation of the AFL-CIO that public school systems should be the presumed prime sponsors in such programs. We continue to favor the approach suggested in the legislation introduced by you, Congressman Bredemas and a number of your colleagues.

We believe your bills would place the prime sponsorship responsibility precisely where it belongs--in most instances, with the responsible elected officials of the governmental unit involved. More often than not, this would mean the Governor's office, the county government or the city government. If, of course, those officials are unable or unwilling to assume the responsibility for prime sponsorship, your bill makes other agencies, including public school systems, eligible for such sponsorship.

In our judgment, it makes more sense from an administrative standpoint to place the responsibility in the hands of those officials who are in a position to assure coordination of the various services which would be offered in a comprehensive program such as that proposed in your bill. The prime sponsor should be at a higher administrative level than the various agencies providing the services for children and families receiving them. Only in this way, it seems to us, can we be certain the proper administrative coordination of education, health, nutritional and other services which would be involved. Your approach toward meeting this problem is, we believe, correct. We hope you will resist pressures to change your position on the issue of prime sponsorship.

We hasten to add that we believe strongly that public school systems, like other public and nonprofit agencies, should be encouraged to apply to prime sponsors to operate programs. We recognize, of course, that your bill provides such encouragement, and we also support those provisions.

Sincerely,

Jack Baidler

Jack Beidler
Legislative Director

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We have had an opportunity to read the testimony before the subcommittees by William B. Welsh, Executive Director for Legislative and Political Affairs of the American Federation of State, County and Municipal Employees, and we find ourselves in substantial agreement with the position that union has taken on the issue of prime sponsorship. We wish to associate ourselves with its position on this question.

Our support for your bills is based upon a number of factors. First and foremost, enactment of such legislation is clearly in the national interest and would greatly benefit the children and families of America. It is therefore in the interests of our members and their families. Your bill also provides that labor unions, among other types of organizations, are authorized to operate day care centers, providing they met the standards and criteria spelled out in the bill. We believe the bill holds out interesting possibilities with respect to the participation of industrial unions, such as the UAW. The option of locating union-sponsored day care centers near work sites might well make the life of the working parent or parents somewhat easier.

In conclusion, Mr. Chairman, I simply wish to reiterate in the strongest possible terms our firm support for this legislation with the one amendment we have suggested--the prohibition on the participation of large proprietary, "for-profit" day care operations. Your bills should be anacted by this Congress without further undue delay and be signed into law by the President. Our children deserve no less. You can depend upon the UAW to lend whatever assistance we can in helping to enact the Child and Family Services Act into law.

CHILD CARE SERVICE
FRONT AND ORANGE STREETS
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[illegible]

EXECUTIVE AND ADMINISTRATIVE OFFICERS
HARRY A. MCNICHOL, CHAIRMAN
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DIRECTOR
CHARLOTTE L. HAMME

April 18, 1975

APR 2[illegible] 1975

The Honorable Walter F. Mondale
United States Senate
Washington, D. C. 20510

Re: HR 2966 (94th Congress)
S 3754 (93rd Congress)

Dear Senator Mondale:

Enclosed is our analysis of the proposed Child and Family Services Bill which will support neighborhood-based, comprehensive services to children and their parents. Your interest in this legislation is very much appreciated.

As one of the three largest public child welfare agencies in Pennsylvania, we have had extensive (over 20 years) experience in providing a broad range of children's services, including the prime sponsorship contract for Title IV-A Day Care, and we have struggled to coordinate these with other community agencies: school, juvenile court, mental health, community nursing services, etc.

Members of our staff have studied this bill carefully and have prepared a position paper based on our experience, which is attached. As you will note it speaks to broad concerns, such as whether the public schools or social welfare oriented organizations should be "prime sponsors", and to concrete concerns re: specific wording of specific paragraphs in the bill and to problems of children and families.

Should you or your staff have the time and interest, we would appreciate an opportunity to appear in person to support and elaborate the positions taken in the attached "testimony".

We look forward to a revised bill reaching the White House in this session of Congress. We will do our part locally to develop support for a strong, sound bill - with adequate funding, on behalf of children.

Sincerely yours,

Charlotte L. Hammell

(Miss) Charlotte L. Hammell
Director

TLF:jp
Encls.

TESTIMONY ON H.R. 2966
BY
DELAWARE COUNTY, PENNSYLVANIA, CHILD CARE SERVICE

I. INTRODUCTION

This material has been prepared by both administrative and line staff of Delaware County Child Care Service, a large, public child welfare agency accredited by the Child Welfare League of America, with 25 years of professional experience in providing a full range of children's services, including Protective Service, Foster Care, Shelter Care, Adoption, Homemaker and counseling, etc., and four years as the prime contractor for Title IV-A day care service. The latter include the operating of two day care centers (one for handicapped children), a large family day care service and sub-contracts with five private day care agencies. The overall agency budget for 1975 was $6,000,000, including $2,000,000 for the Title IV-A Program.

The first section is an overview directed toward certain basic administrative and fiscal matters in the Bill, and suggests ways to strengthen or achieve the explicit or implicit goals of the Bill. The second section focuses on service issues. In the appendix, specific paragraphs or sentences in the Bill which seem impractical as worded, are identified.

II. ADMINISTRATIVE AND FISCAL ISSUES

A. COMPREHENSIVENESS

A comprehensive act for children is long overdue in America (the last attempt was made in 1935). A truly comprehensive act will:

1. serve children from conception to age 18, including services to teenagers to prepare them for healthy pregnancies and successful parenting;
2. support and encourage the widest possible range of services to facilitate healthy development and maximum realization of potential;
3. focus on prevention as well as treatment, perhaps with a formula or ratio of monies for research and primary prevention efforts;
4. offer services to all socio-economic groups, with a sliding fee-scale if necessary;
5. not favor any one age group or one service in the law itself, but will permit priority setting at the local level, based on documented needs and gaps in services.

B. COORDINATION

Studies have documented what social agencies experience, that many families are "multi-problem" and need a gamut of services: day care, abuse or abuse prevention, counseling, foster care, protective, truancy, delinquency prevention and/or help with a runaway. To expect a multi-service agency to provide the services these families need and show a clear audit trail for each of the services is anachronistic.

A series of Federal Acts establishing funds to serve the same "population at risk" i.e. children and their parents, with different funding formulas, different organizational structures, different requirements in the laws and different Federal Regulations, will make coordination at the local level impossible and extremely expensive and inefficient.

A Comprehensive Act for Children should supercede, incorporate and make consistent as much of the major legislation dealing with children and their parents as possible. In particular, the following Acts fund similar services for the same population:

1. Several Titles of the Social Security Act, including Title II (P.L. 93-647) fund services for children;

2. The National Center on Child Abuse and Neglect (P.L. 93-247)

3. Juvenile Delinquency Prevention and Treatment (P.L. 93-415)

4. Health Services, including the Early, Periodic, Screening, Diagnosis and Treatment Services under Title XIX and the Nutrition Program under the National School Lunch and Child Nutrition Act (H.R. 3736.

To whatever extent is possible, programs for children should be:

1. consistent in:

    a. funding formulas, including the percentage of "local match",

    b. requirements that employees be hired according to a merit system,

    c. contract requirements, contract periods, proposal guidelines and budget and monitoring systems,

    d. protection of client rights, e.g. confidentiality, rights to prompt determination of eligibility, right to appeal, etc.,

    e. the role of parents or children-consumers of the services,

    f. eligibility for free service need not be identical but should be rational and consistent enough for parents and communities to understand,

    g. Federal Guidelines and standards, particularly consistent standards for the same services (e.g. day care for abused children and handicapped children),

    h. requirements in re: organizational structure at the state and local levels,

    i. rights and responsibilities of "prime sponsors", criteria for who can be a "prime sponsor",

j. relationship of the Federal agency to "prime sponsors",

k. appeal procedures for "prime sponsors" and sub-contractors;

2. administered by the same Bureau of the Department of Health, Education and Welfare - i.e. a Children's Bureau with broad responsibilities for planning, administering the funds allocated by Congress, monitoring, sponsoring research, reporting to Congress, etc.

3. Funding formulas might be different for research, planning and training but even that tends to appear as favoritism toward educational institutions at the expense of service-giving agencies.

The Secretary of HEW or Chief of the "Children's Bureau" should be required to develop a consistent and fair plan for funding institutions and students for all of the child-serving disciplines to prepare them for any of the services needed by children. Only with documented need should one discipline or service be favored.

C. MAINTAINING AND STRENGTHENING LOCAL EFFORT

The expectation of "maintenance of local effort" is sound, lest under political pressure, local and state governments might divert monies from serving the needs of children to expanding the police force or fixing potholes. Perhaps for the next few years when state and local governments are is such desperate financial situations, Congress might permit Revenue-sharing monies to be used for "local match".

The "local match" requirements should be high enough to motivate economy and wise spending on the part of project sponsors and service-giving agencies and "Prime Sponsors", but it should not be so high that children from poor urban and rural communities are unserved.

Consideration should be given to matching formula(s) related to state per capita income as well as the number of children.

D. MAINTAINING AND STRENGTHENING FEDERAL EFFORT

A plan to provide money for training, demonstrations, planning and "tooling-up" is sound. Progressively larger Federal appropriations (especially if the money is really appropriated) is sound. To maintain effort as anticipated in the law, reallocations of monies which are not spent by some programs or states is essential.

If monies which programs and states encumber out of necessity or optimism, are returned to the Federal Treasury for use in other government enterprises, the Federal Government fails to maintain its effort on behalf of children.

E. ACCOUNTABILITY AND MONITORING SYSTEM

Accountability mechanisms and a monitoring system need to be designed (one system for all of the children's services funded under one Bureau). One sound system does not exist in the field of social services, as far as we can determine.

1. The system needs to be simple, clear and logical enough for administrators and boards of small service agencies to understand and follow.

2. The system should provide prompt, regular feed-back to Federal and/or State or local "Prime Sponsor" monitors so that agencies who are not in compliance can be advised promptly and brought into compliance.

3. Federal, State and "Prime Sponsor" staff need to be trained in understanding the system, and in the monitoring and consulting processes. There is an absolute dearth of trained monitors.

4. The first stage is to design a system to insure that money is spent in compliance with the Law and Federal Regulations; then it should be pre-tested. The second stage is to train a cadre of Federal and State monitors in its use; then the agencies who do or would receive Federal monies should be trained.

5. As the effort is begun and stabilized, research and demonstration projects can seek to develop a system to measure effectiveness of service against the amounts of money spent. Some study has been begun on some services, but to develop the tools for all of the children's services, may be a 10-20 year project.

F. ACCOUNTABILITY - WHO SHALL BE HELD ACCOUNTABLE?

The Committees considering this Bill should seek legal advice on who could be held accountable under its present wording. To what extent could the Federal Government hold accountable in the Courts, a policy-making board that was composed 50% or more of parents with little or no experience in administrative and fiscal matters and whose very membership changed every year or two?

Also, if such policy-making boards composed of loosely elected members make decisions on the selection of staff, development of programs, budget, contracts and sub-contracts, etc., what happens to the accountability of the State Governments and/or County Commissioners when they provide the "local match".

G. ROLE OF CONSUMERS OF SERVICE - ADVISORS TO POLICY MAKERS OR POLICY MAKERS?

This Bill changes the role of parents from advisors-to-policy-makers, (required by Federal Interagency Guidelines) to policy-makers.

Parents have been very effective advocates for sustaining Federal and State funding for day care in the face of severe threats.

The value of parent in-put in programming for day care programs at the Center level can be documented. Such decisions as; the need (or not) for a breakfast program, sex education, does a two-hour nap keep children up so late that parents have no time for themselves, etc., are decisions which should be made only with parental participation.

What documentation exists re: the readiness of parents to assume the extensive planning, fiscal and administrative responsibilities assigned to them in this Bill? Some (but how many?) parents are highly motivated, knowledgeable and willing to leave their children and homes, after a day's work to attend evening meetings devoted to such issues as budgeting, evaluating sub-contract requests, or complaints, reviewing personnel policies, firing an undependable bus-driver with five children, meeting with a union, etc.

Does Congress know enough about parent readiness for these responsibilities to build a multi-billion dollar system upon them as decision-makers? We believe some systematic documentation is needed for example:

1. What kinds of knowledge are required to make the highly technical decisions involved in program planning, administration, evaluation, etc.?

2. What is the unique expertise of parents? of low-income parents? of disadvantaged parents?

3. In periods without crises, what is the average attendance rate of parent members of policy committees?

4. What has parent participation on day care advisory committees cost? What kind of decisions have they made? With what consequences?

5. What abuses of power occurred, e.g. parents hiring their friends, or introducing some bias in admissions to favor their friends and neighbors? Have any bias occurred in hiring or admissions, influenced by parent bias?

6. How long do parents use day care or any children's service? Have parents who no longer use the service remained on policy councils? Have parents stayed on the board long enough to acquire needed knowledge, and then left to be replaced by new parents who again needed to learn the basics?

H. ACCOUNTABILITY - WHO SHALL MONITOR? CENTRALIZED VS. DECENTRALIZED RESPONSIBILITY

Final responsibility must rest with the Secretary of HEW but who shall make the on-site visits, review grants, budget proposals and invoices? Who shall consult with agency boards and administrators to achieve compliance and improve quality of the services?

Can the Federal Government no longer trust the states to develop state plans and monitor and consult with the county programs for children? The Federal Government should be consistent in the role assigned to the States in administering children's programs.

Does Congress want to create the extensive Federal bureaucracy required to monitor individual service operations, and/or to monitor "prime sponsors"?

If large cities, counties and/or some organizations with demonstrated competence are permitted to serve as "Prime Sponsors" they could be charged with responsibility to monitor and consult with sub-contractors. (We have had success in carrying this responsibility as a "Prime Sponsor" with our sub-contractors.)

Our experience is that when/if Federal and State Regulations, Proposal and Budget and Invoice Guidelines are stabilized, one trained, experienced professional could monitor and consult with six to eight direct-service programs.

Our experience suggests that in a period of expansion of services, one state or federal monitor/consultant could serve no more than two suburban county "prime sponsors".

Adequate funds must be allocated to hire and train professional personnel with skill in monitoring and giving technical assistance, plus adequate travel allowances for on-site visits. Such staff need to be administered and need support services from accountants, specialists, etc. Otherwise, extensive mismanagement and unbelievably poor fiscal practices will thwart the good intentions of Congress, parents and local boards.

I. PROFIT MAKING - CAN PROFIT MAKERS BE ENTRUSTED WITH THE NEEDS OF CHILDREN?

The nursing home scandal should be sufficient answer to that! Quality services are dependent upon the quality of personnel. The only way to make a profit is to reduce the quality of personnel or the ratio of personnel to persons served.

If profits can be made on human services, why have so many hospitals and universities gone "public" or bankrupt?

J. "PRIME SPONSORS" - THE PUBLIC SCHOOLS?

In some communities, the public school may be the best staffed children's service, with progressive, interested leadership. In others, as in this county, the school system is divided into many independent districts which vary greatly. Some have little interest in services beyond the traditional; they want to expel children with even slightly non-conforming behavior; they resist serving handicapped children.

Elementary school teaching is different from caregiving/teaching in pre-school years and is not the only or primary discipline in the broad range of health and social services needed by children and their parents.

The Act should not assign "Prime Sponsorship" to any one type of agency or organization but expect HEW to establish sound criteria for the selection of "prime sponsors", allowing enough latitude that localities can identify the organizations with best potential for success.

III. SERVICE ISSUES

A. RECOMMENDATIONS FOR SERVICES:

The following services should be included under a Comprehensive Child and Family Services Act and "prime sponsors" should be encouraged to provide them directly or sub-contract for them and coordinate them:

Day Care, Family Day Care, After-School Care;

Breakfast and lunch programs for needy children up to age 18;

Homemaker and Human Services Aides Programs;

Casework, counselling, referrals, protective service;

Psychological and psychiatric service;

Medical care including prenatal and postnatal and health care for children and parents;

Community Nursing;

Education for parenting;

Tutoring;

Group and peer counselling for teenagers and their parents;

Temporary overnight shelter in emergency situations;

Training for social work, teaching and administration in child care programs in cooperation with schools and colleges; training of paraprofessionals;

Diagnostic and remedial help for the child with problems or birth defects;

Transportation to services not available in the local center;

Employment of neighborhood people including teenagers and the able aged;

Summer and vacation programs - recreational and educational.

We recommend "Family Support Centers" that would be neighborhood based and provide a wide-range of the above services.

B. SERVICES TO ADOLESCENTS

A 1975 report of a Delaware County Child Care Service Task Force on Adolescence found that approximately 2% of all non-delinquent teenagers in the county are being referred to the service, that an increasing number of teenagers are being referred as abused children and that the agency has very little to offer them. These children are often expelled from school because they act out are disinterested or truant. There are few community services for them. There are no jobs and parents are frustrated. Many teenagers are poorly fed and/or in need of medical care.

C. PREVENTION OF NEGLECT AND ABUSE DUE TO PARENTAL INADEQUACY

Since Social Workers can predict in advance children who are at high risk of being severely neglected or abused, community centers with supportive services can be used for the prevention of child maltreatment.

Parents with severe incapability:

Where mothers and/or fathers are chronically mentally or physically ill, severely depressed, are mentally retarded come from families with abusive patterns, are immature or lack motivation, Day Care alone is insufficient. Children from these families will be less at risk if the services begin with the prenatal period, if staff work with the parents, with extended family, if available, and with the children, assessing capacity for care and supplying or referring to appropriate services.

Children with handicaps or birth defects:

Another group of children at risk is those who are handicapped or have birth defects and who place extra burdens on their families. Their siblings are also at risk because of the energy expended on the exceptional children and the pervasive depression exceptional children produce in parents. The family centers could provide specialized day care and supports such as teaching parents to care for their children, supplying homemakers, nursing or para-professional help to relieve some of the stress and responsibility. Adequate medical care and play therapy materials might also be provided.

Disturbed children:

Problems of disturbed children can be diagnosed and treated at the centers. The neighborhood base would make it possible for the parents to be closely involved In Delaware County there are two pre-school group therapy units, a service of the Mental Health and Retardation Department. Finding problems of children when they are at an early age and dealing with them before it is too late could be a valuable service of the centers.

Children of divorced or separated parents:

We are observing signs in children whose parents divorce or separate, that are similar to those seen in physically abused children This could be avoided in many instances if children and parents received the counselling and other supports needed.

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4/9/75

Delaware County, Pennsylvania
Child Care Service

APPENDIX

CONCERNS REGARDING SPECIFIC PARAGRAPHS OF HR 2966

OUR MOST CRITICAL CONCERN IS WITH THE FOLLOWING PASSAGES

Sec 104 (a) (7)

pg. 16 line 7 Given this wording, a "prime sponsor" Policy Committee could have for its staff support, conference attendance, baby-sitting, travel expenses etc. $100,000 - $250 000? Is this what Congress intends? An outside limit of $25,000 for a "prime sponsor" committee and $35,000 for a State policy committee would be enough.

Sec. 104 (e) (2)

pg. 20 line 3 "where prime sponsor is found not to be satisfactorily implementing child and family service programs" the Secretary can by-pass the prime sponsor and award contracts directly to program applicants.

No prime sponsor can do everything right in the first few "shake-down" years and can never please every potential applicant for Federal funds.

Standards must be defined by the Secretary as to what constitutes grossly unsatisfactory conduct; an appeal/grievance procedure with all the customary judicial safeguards should be established lest prime sponsors be at the mercy of irresponsible charges, or agencies with good potential for serving children be denied access to Federal support.

Congress should mandate the Secretary to develop a sound appeal/grievance procedure (short of the Courts) to hear complaints against prime sponsors, State bureaucracies and the decisions of HEW personnel.

Sec. 106 (c) (1) and (2)

pg. 29 line 18 Prime sponsor proposals for Title IV-A day care average 200 pages. Delaware County is a suburban area with only a few school districts, and about four colleges, and one Head Start agency, perhaps only one community action agency. In Philadelphia, the number of major colleges alone is 25 and the total list of educational institutions consumes five pages in the yellow section of the telephone book.

How realistic is it to expect the prime sponsor to provide copies of the proposal for all of them to comment? For what purpose?

Sec. 2 (a) (4) (b)

pg. 3 line 1 Priority should be given to children and families with the greatest need without reference to age. In many areas, teenagers are the least served and the most "needy" group of children.

Sec. 4 (a)

pg. 4 line 16

The following addition would reduce the administrative costs of operation: "with Federal Regulations, proposal and budget guidelines available to potential applicants no less than six months, and after 1977, no less than 12 months, in advance of the final grant application date."

Sec 101 (a)

pg. 5 line 13

Congress should consider with the Secretary of HEW what other children's service programs can be transferred to this new Director in order to provide for comprehensive planning and coordination, first at the Federal level and subsequently at the State and local level.

Sec. 101 (b)

pg. 5 line 19

The administration of the juvenile justiceprogram and health programs need inclusion particularly because their omission from the list could be misinterpreted.

Sec. 102 (b) (2)

pg. 7 line 13

(A) The term "foster care" should be listed as it is part of the nomenclature for full day care.

(B) "Counseling" should be specifically mentioned as it is part of the nomenclature (as well as "consultation for parents").

Sec 103 (a) (2)

pg. 13 line 8

(B) We recommend a change to "relative number of children under 18"

(C) Can this be modified to permit more flexibility in the use of money which will be available on very short notice?

Sec. 104 (a) (2)

pg. 15 line 3-5

Modify the wording to give preference in awarding prime sponsorship to organizations that have demonstrated fiscal responsibility and administrative capability.

It is very unrealistic to expect an organization to have demonstrated the capacity to coordinate the delivery of services by public agencies. Has this capacity been demonstrated?

Sec. 104 (b)

pg. 16 line 15

Is it the intent of Congress to expand the Federal bureaucracy sufficiently to relate to several thousand cities and counties, as opposed to having the Federal bureaucracy relate to the States and hold them responsible for relations with the cities and counties?

Sec. 104 (c) (A)

pg. 18 line 5-10 This paragraph gives preference to day care and Head Start parents who will be biased in favor of services they know and need at the expense of services needed by older children

Sec. 105 (b) (B)

pg. 24 line 4 Could the Secretary be mandated to produce guidelines re: parent membership lest some parents get elected and never move off the board and become perpetual or "professional" parent representatives? The amounts of money involved, the employment of persons, the awarding of contracts provides opportunity for favoritism and "kick-backs".

line 8 How shall these parents, wielding such power and control of such extensive sums of money, be held accountable?

Sec. 106 (a)

pg. 25 line 17 We believe that Congress should not give preference to one age group.

pg. 26 line 1 In many rural and suburban areas, services are scarce or non-existent, for the working class or middle-class (as well as the poor). We urge that Congress follow the precedents set in other legislation (most recently Title XX of the Social Security Act) to provide services for all children and let the financially able pay a fee.

line 3 We urge that the handicapped be given priority, also.

Sec. 106 (b) (17)

pg. 28 line 23 We urge Congress to consider carefully with the Secretary the best approach to the responsibility for evaluations of programs and monitoring of fiscal management. Prime Sponsors can monitor, evaluate and provide technical assistance We, in Delaware County, perform these functions for Title IV-A sub-contractors.

If Prime Sponsors are to monitor and evaluate for program compliance and fiscal management, guidelines must be very clear They will be powerless if the law provides an easy route for dissatisfied programs to go directly to the Secretary of HEW for funding.

In Pennsylvania, licensing is a legal responsibility of the State Department of Public Welfare. This need not be assigned to the local Prime Sponsor.

EVALUATION AND MONITORING FUNCTION MUST BE BUTTRESSED WITH TECHNICAL ASSISTANCE. In the initial years of a program's funding, non-compliance is more apt to be caused by inexperience of board, administration and staff than by willful disregard of the law or Federal Regulations -

Sec. 107 (b) (11)

pg. 33 line 22 The burden of designing fiscal control and fund accountability procedures should not be placed on prime sponsors, rather the Secretary of HEW should be mandated to design such systems in consultation with prime sponsors and program operators.

Title II - Standards and Evaluations

Sec 201 (a) (1)

pg. 41 line 23 Impossible to do in six months: 18 months would be more realistic.

The process should require public hearings and the opportunity for comments from prime sponsors, program operators and standard setting organizations, e. g. Child Welfare League of America.

Sec. 201 (c) (1) and (2)

pg. 43 line 16 23 It is almost impossible for any prime sponsor or program to meet that standard of compliance especially in a field that is expanding rapidly. Rural counties have a particularly difficult time because quality standards require trained staff who remain with the program. We recommend that this paragraph be struck from the bill, leaving to monitors to decide whether a program is doing the best that it can given its location and accessability to resources, including staff.

Sec. 203

pg. 46 pg. 47 As indicated earlier, the responsibility for monitoring warrants more study. THE RESPONSIBILITY FOR PROVIDING TECHNICAL ASSISTANCE MUST BE INCLUDED WITH THE RESPONSIBILITY FOR MONITORING.

Sec 302

pg 56 Unless HEW already has one, a research and demonstration project to develop a simple, sound, uniform fiscal accounting system that would be easy to follow and easy to monitor - would make a great contribution.

Sec. 403

pg 59 We recommend that a high priority be assigned to the development of training programs for personnel to monitor and provide technical assistance - at all levels, local, State and Federal.

Delaware County, Pennsylvania
Child Care Service

TEENAGERS NEED HELP

An Abused Teenager

Jenny R., aged 15, went to her school nurse with bruises on her back and a black eye, saying her father beat her up. The nurse referred Jenny to Child Care Service advising that until last year Jenny was an "A" student. The occasion for the beating was when she came in very late. Jenny is from an Italian-American family. Her father is a businessman; her mother, a housewife. They are interested, responsible parents.

Jenny was seductive, provocative, manipulative, was threatening to run away. She was sloppy, wouldn't cooperate at home, was completely turned off by adults, particularly her parents. They were willing to accept a referral for counselling or therapy and to pay for it and they asked the agency's help in engaging Jenny. Jenny came to an intake interview, was hostile and resistant to the referral that was offered, didn't keep another appointment to talk about it further. Jenny ran away with a boy who was a high school drop-out.

A Teenager Is Expelled from School

Bobby R., aged 14, was expelled from school because of non-attendance and discipline problems. He is the oldest of eight children born to parents who married too young; didn't provide adequately for the children, either financially or emotionally. The father has periodic drinking episodes when he beats the mother and the children. Bobby as a young child was withdrawn, a non-learner and still cannot read. His truanting and belligerence--he beat up a teacher--caused the school to expel him. He seldom comes home, has learned to pay his way by stealing and he is living with a known drug pusher. He has been inaccessible to Child Care Service's caseworker.

A Teenager Is Helped by an Appropriate Community-Based Service

Matty [illegible]., a friendless, 16-year old from a black family, frequently truanted and was ready to drop out of school. From time to time she would run away and go on sexual sprees. She was in conflict with her mother who reacted by being rigid and angry and sometimes beating Matty. In desperation, Mrs. Y. appealed to Child Care Service to place Matty. The only thing mother and daughter could agree on was that Matty had no friends or social life and was desperately unhappy. Matty so distrusted adults that she could not even talk with her young social worker. She was assigned to a 17-year old therapist who could communicate with her and who involved her in some social activities. The therapist would also intercede with Mrs. Y. at times of stress, helping Mrs. Y. to understand Matty's feelings. The home situation quieted down and the running away stopped. Matty began to attend school regularly, to have friends and social life. Her grades improved and she was able to hold a Youth Corps assignment as a typist in the Child Care Office. She hopes to finish high school and to become a secretary. The expectations placed on Matty by the therapist with the inclusion of emotional support helped her to take on age-appropriate tasks and return to the mainstream.

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4/14/75

CHILD AND FAMILY SERVICES

Mr. MONDALE. Mr. President, as Senators know, the Senate Subcommittee on Children and Youth, which I am privileged to chair, and the House Select Committee on Education, ably chaired by Representative Brademas, have held seven joint Senate House hearings on S. 626 and H.R. 2966, the Child and Family Services Acts.

We have scheduled our final 4 days of joint hearings on this legislation for June 5, 16, 17, and 19.

Recently, National Public Radio presented an award-winning "Options on Education" series, including a show concerning this legislation and our hearings entitled, "Who Cares for Children?"

I have had an opportunity to review the transcript of that program. It includes a thoughtful description and discussion of the legislation, with statements from a number of individuals who have testified at our hearings.

So that this information may be available to my colleagues and interested members of the public, I ask unanimous consent that the transcript of "Who Cares for Children" be printed in the Record.

There being no objection, the transcript was ordered to be printed in the Record, as follows:

Who Cares for Children?

(A Transcript of "Options on Education," March 19, 1975)

Key:

A: Announcer Mike Waters.

JM: Moderator John Merrow.

C: Various "latch key" children.

WP: William Pierce, Child Welfare League.

AC: Audrey Colom, Vice-Chairwoman, National Women's Political Caucus.

CB: Carol Burris, President of Women's Lobby.

CHMN: Alphonso Bell, U.S. Representative (R.-Calif.)

AF: Arvonne Fraser, Women's Equity Action League.

T[illegible] Tutti Sherlock, Olmstead County Council for Coordinated Child Care, Rochester, Minnesota.

EK: Erline Kendall, Nashville, Tennessee.

JG: James Gallagher, Frank Porter Graham Child Development Center, University of North Carolina.

SJ: Sid Johnson, Staff Director, Senate Subcommittee on Children and Youth.

WS: Wayne Smith, National Association for Child Development and Education.

A: From National Public Radio in Washington, I'm Mike Waters with "Options on Education."

(Music: Who really cares? Who really cares?)

C: And I sometimes do the house. Clean up. And do sometimes the lunch for the . . .

JM: Now, how do you get into the house after school?

C: Well, I have the keys to get into the house. And we all of us have different keys—my sister, and my other sister and I and my mother and my father.

JM: Where is your father?

C: He works with my mother in the Watergate, too.

JM: How old are you?

C: I'm 11.

JM: And how many kids are there in the family?

C: Four.

Second Child: I have to use the keys to go out and in.

JM: Are you afraid of losing them?

C: Yep.

JM: Does your mother work?

C: Yes.

JM: What kind of work does she do?

C: Day care center.

JM: What about your dad? Does your dad live at home?

C: Well, my mother and my father got divorced.

JM: So you're pretty much in charge for a couple of hours?

C: Yeah.

JM: Now, what about your small brother during the day?

Third child: I go to a school and take them from the school, all of us go . . .

A: Those kids are latch key children. And there are millions more like them in the country. They need some sort of supervised child care. And it isn't available. It's a mistake to think that day care is just for infants and pre-school children. Most kids without care are in school, as you'll learn on this "Options on Education" program, which we're calling, "Who Cares for Children?"

(Music).

A: Let's begin with the statistics. The Child Welfare League testified on Capitol Hill that over 32 million children under 18 need child care. Now, right now there are only 4.3 million day care slots available. And only 1 million of these slots are licensed. That means that a lot of kids are getting unlicensed day care. And a lot more aren't getting any care at all. 25 million children out of the total 32 million are already in school. They need part-time adult supervision as a supplement to school. The remaining 7 million are infants or pre-schoolers. The lion's share of kids needing day care, 26 million, are the children of working mothers. In some cases, the mother may have to work. She may be the only parent in the home. In many cases, the mother has her own career—as a lawyer, architect, doctor or nurse. Another 1.2 million children have a parent at home, but that parent is handicapped or too sick to look after the children. 700,000 children have working fathers as their only parent. And another 4 million children are themselves handicapped and need special care. It adds up to 32 million children. Our reporter, John Merrow, of that Institute for Educational Leadership, asked William Pierce, the Child Welfare League's lobbyist, just how accurate the statistics were.

JM: Can you back those up? Is that data pretty good?

WP: Well, we think that in this case the burden of proof is on those who say the need for child care is not there. It's been 11 years since the Federal government, which spends hundreds of millions of dollars on surveys and data-gathering extravaganzas, has bothered to find out what the real child care arrangements are in this country. And, we don't know what the reason is, but we do know that they just haven't gathered the data. We think that if they gathered the data, and it could be relatively easily done, that they would find results something like what we estimate. Since they have not found out where the children are, we have had to extrapolate from the data that does exist. We say that our data is as good as can be "guesstimated." And if they think our data is too high, we invite them, we encourage them, we beg them, to conduct their own survey. Some of those surveys are very difficult to do. The only way that you can do some of those surveys is literally station people on street corners to find out where children go. There was an interesting survey done in London recently, and that's the only way they were able to find out. They recruited teams of social workers who stood on the street corners starting at 5 o'clock in the morning, and tracked parents. If they left their house and trundled off down the street with a baby carriage, and the baby carriage and the baby stayed somewhere, they had discovered a child care arrangement. They found that there were literally thousands and thousands of babies cared for in the most frightening and damaging situations. Not even the last survey done in the United States was as imaginatively done as that one done in England. We need another survey.

JM: Tell me about the available number of day care slots, or whatever the appropriate term is, and then let's go on after that to talk about the kinds of ways children are actually cared for in this country.

WP: All right. First of all, we know that there's roughly a million licensed day care slots in this country.

JM: Who licenses day care?

WP: Most day care in the States is licensed by state departments of welfare. Day care can also be licensed by health departments. In some states, the health department is the licensing agent, as in Kansas, and they do a very fine job. In other places, it's departments of education. Generally, day care has been seen to be a welfare function and, therefore, the licensing function has been performed by the welfare department.

JM: The figures we're working with right now say there is a need for roughly 32-33 million, and there are only a million positions available?

WP: There are only a million licensed. That means that if we want to be fair in talking about supply we have to try and estimate what the number of unlicensed day care places are. Most of the unlicensed day care places, according to all of the studies that we have available (one funded by the Federal government and conducted by the Westat Corporation, another done by the National Council of Jewish Women and published in a report called *Windows on Day Care*), are of extremely poor quality because, frankly, most unlicensed day care, like most unlicensed restaurants, people would rather function above ground because it's more profitable, and they can attract better trade and charge better prices. If someone is selling, or licensing anything on the sly, it usually is that their product is questionable. About 95% of all of the unlicensed care according to the estimates is bad. Five percent is simply run by good people, or people who for one reason or another cannot comply with the eccentricities of the licensing law in a jurisdiction or two. We estimate that the unlicensed, illegal, underground (however you care to call it) capacity in this country, and this is extrapolating from the studies that have been taken, is about 3.3 million places. So, if you add those with the licensed places, you come up with about four or four-and-a-half million places. Most of those can't be used, though. An awful lot of the licensed day care places and a lot of most of the unlicensed day care places are so unsafe and hazardous that we wouldn't put our *dog* there, let alone our children. So we're left with a net of about a million places that can be used. Subtract the million from the 32.5 million needed, and you've got a net of 31 million children who, we say, need care, and you've got to create the spaces to care for them.

JM: I'm struck by the bloodless, colorless language of "licensed" vs. "unlicensed." Then you went on to say that some were unsafe, that you wouldn't put your dog there. What do you mean? What goes on in a place like that?

WP: Well, in an unlicensed day care facility, and it may be a family day care home, or a group day care home, or a day care center—in an unlicensed facility you can bet that, first of all, there's not enough space so that the children can have the freedom of activity that they need. They're either penned up, or they're seated in front of a television set. That's the usual choice. They also, quite frankly, are trying to operate a business illegally. They're trying to avoid taxes, they're trying to avoid land use and zoning codes. As a result, in most of the unlicensed situations, the children have to be placed in very unobtrusive situations. In the house, very little of the house will be changed. If it's in a center, the center will be located in a building which is unsuitable. If it's . . . no matter where it is, it's very unlikely that the children will be playing outside, because a lot of noisy kids will attract the attention of those who say, "Why are 15 or 20 kids playing in that house, or next to that warehouse? They must have something going on there. It's not a school. It must be a day care center. And maybe the children shouldn't be there." The other thing is that if you simply look at the statistics from the studies that we do have, of what is in an unlicensed day care center, you'll find that there's not enough cots for the kids to take naps, there's not enough food for them to eat, there tend to be very few toys, if any at all.

JM: Those are features of licensed day care centers, then?

WP: Those are features of unlicensed day care centers.

JM: No, but *licensed* day care centers would have enough cots, would have enough toys, and so on and so forth?

WP: Most licensed day care centers, yes. The problem with licensing anything is that you have the corruptibility of the licensing official which comes into play, and I think anyone would be naive to think licensing officials cannot be corrupted, let's say, in terms of building code enforcement, and zoning, and fire and hospitals and everything else, that one or another of the licensing officials engaged in children's facilities cannot also be corrupted. But a good licensing program gets around that by rotating licensing people.

JM: Let's go back to our numbers again. You said there are four-and-a-half million available slots, licensed and unlicensed. We began with a figure of between 32–33 million. I hope I'm remembering the figures correctly. That leaves an awful lot of children who, by your figures anyway, need some kind of day care, but there are no positions. What happens to those kids? How are those kids—that 28 million, whatever the number would be—how are those kids being cared for today?

WP: Well, we know from looking at the statistics gathered by the Department of Health, Education and Welfare for the children of women on welfare, children in families receiving aid to families with dependent children, APDC kids, that a great number of those kids are locking after themselves, or that the parents are claiming to look after them while they are at work. We think that this is probably not just limited to welfare children. I happen to live in a fairly wealthy suburban county, Montgomery County, Maryland, and surveys of the situation of children in Montgomery County are not much different from the surveys that HEW has reported in terms of APDC children. When people work, if they don't have day care available—and we know from the statistics that they don't—there's no magic. They simply have to rely on the children caring for themselves. Those are children who look after themselves . . . latch key children . . . who, if they're ill, or if school is out . . . we're talking now about six hours a day, every day, and we're talking about 10–12 hours a day whenever school is out, or they're ill or they have no public school to go to.

JM: So they're taking care of themselves. They're without adult supervision. They may be at home, they may be out on the streets, but essentially they're . . . and you call them latch key children—what does that mean?

WP: Well, *latch key child* is the term used to describe the child who . . . most parents have to lock the door, so they take the house key and string it around the child's neck and say, "No matter what, don't lose your key, and if worst comes to worst, come home, unlock the door and slam it behind you, and be good." That's all.

JM: You also said that some working mothers take care of their kids by telephone. I don't understand that.

WP: Well, if the child is at home—and I must admit there are people that I know who are professional child care people who do the same thing—if there's no school-age day care available, what they do is they know that their child should be home from school about 3:30 or 3:45, and they simply sit at their desk and call every five minutes until their child answers the phone. They give the child . . . they ask the child how the day went at school. They say, "Be sure and have a snack. Don't watch TV. Do your homework. Do your chores. I hope to see you at 6 or 6:30." And they may call the child to check to make sure that the child is in the home every 15 or 20 minutes or so.

JM: I'm sure there are a lot of listeners reacting to that right now in this way: "That mother belongs at home. She shouldn't be calling from her office or from wherever she works to find out how her kid is. It's just wrong."

WP: Well, what's wrong is that we have a policy in the United States, as do many other industrial countries, that forces both the father and the mother to leave the home and work outside the home in order to survive economically. What's wrong is that we don't pay people to do the thing that we acknowledge as a valuable service, and that is to care for their children in their own home. Our welfare policy is the same sort of thing. We say to a welfare mother, "If you're just in the home caring for your own three children, it doesn't count. You've got to contribute to the gross national product." We say, on the other hand, that if a welfare mother leaves her home and cares for someone else's home and three children, it's terrific. She's working. And not only that, the woman who pays her $400 a month can deduct it from her income tax. The fact is that if a welfare mother or any other mother, or man for that matter, is performing real services to society, they're worth $400 a month in someone else's home caring for three kids. If they're caring for three kids, they're also performing real work. Some nations have recognized that by counting the work done by the household—and it may be the male or the female—in the gross national product—the so-called mother's wage or householder's wage approach. We haven't recognized that here. On the contrary, we have taken the most vulnerable people in our society, those who are poorest and who have their children to care for, and forced them out of the work place.

C: Yeah.

JM: Tell me about the work she does.

C: About law enforcement and crime, and stuff like that.

JM: How about your Dad? Your Dad is not at home with you?

C: No. He's in the service; he's in Thailand.

Second Child: I practice my piano and I read and I do my homework.

JM: How do you get into the house?

C: My sister wears the keys around her neck.

JM: Well, now does your Mom call up to find out what you're doing?

C: No. We call her.

JM: After school, what do you do?

Third Child: Play basketball or football. Then, after that, probably get some soda, something to eat, and go home. That's about it.

JM: Now, is anyone at home after school?

C: No.

JM: Do you have brothers and sisters?

Fourth Child: Yeah.

JM: Now, who takes care of them?

C: Me. I tell them what to do . . .

A: It's important to make some distinctions among types of day care. Whether it's called center care or home or family care depends on the number of kids involved. Six or more kids and the day care facility is called a center. Under six kids and it's family care or home care. Day care can be non-profit or for-profit. And some for-profit day care is franchised, much as fast food chains and motels are. Most licensed day care is run for profit, but most of the day care facilities are not even licensed. Licensing requirements vary in rigor and enforcement, but the regulations usually spell out minimums for square feet per children, ventilation, bathrooms and available toys, among other things. But distinctions aside, there are many more kids than there are places and day care facilities. Right now, three Congressional Subcommittees are holding joint hearings on day care legislation. Actually, the Congress passed a similar bill in 1972, but former President Nixon vetoed it. Today, the bill's passage seems inevitable. But there are unanswered questions. Congressional hearings are supposed to help answer questions, so let's listen to part of the March 12th Joint House-Senate Hearing. On that day, several women's groups testified in favor of the bill. The hearings, which began in late February, will go on into April.

AC: Thank you very much, Mr. Chairman. I'm pleased to be here today to discuss the Child and Family Services Legislation. I am a parent of a pre-school child currently in day care, and Vice-Chairwoman of the National Women's Political Caucus. I would, at this point, like to speak up for the small percentage of women who work out of choice, not necessity. They and their children, too, deserve the highest quality care available. I am pleased that the Senate bill provides some space on a sliding fee basis in child care programs for families above the Bureau of Labor Statistics lower living standards budget. I know that these families desire for their children the rich and varied experiences that the best child care programs offer, and they are prepared to pay for these programs. To those people who bristle at the mention of day care and equate it with irresponsible or neglectful parents I would like to say that good (not custodial) day care is quality education. The children are learning about themselves, their playmates, their environment, in a healthy and a happy way. They are growing and developing as a result of their experience in day care programs. Now, I would like to take just a couple of minutes to speak about specific provisions in the bill. I am distressed that for the first year funds are authorized only for planning, training and technical assistance. While I don't dispute that ample planning must be done, I am surprised that no money is simultaneously available for already existing child care programs and family service programs—especially those suffering from diminishing foundation or local government support. I can think of several child care programs within walking distance of this very hearing room that might close down soon because their funding is unavailable or unstable. If this bill passes as drafted, I can envision a situation where well-paid planners are scouring the country determining areas of greatest needs while child care programs in those very areas are cutting back or closing down altogether. Children must be the primary beneficiaries of this money.

CB: I think there are three things that my statement really touches upon. The first is the whole question of why it is that we have the large number of households headed by women, the large number of women in the work force that are completely ignored. This bill passed first in 1971 and was vetoed, and these children are still with us, and they're still not getting any care, and we're sitting here once again, all of us who agree on the need and all of us who agree that there is a need and that there ought to be funding are sitting down once again, and I notice that none of the people who disagree with us are here. And we're all discussing once again this problem. And, in the meantime, I was the mother of a child who was a preschooler when this bill first passed. I'm now the mother of a second-grader and, if we keep on at this pace, I'm going to be the grandmother of somebody who needs day care. And we have a continual problem, it seems to me, in the ideas at HEW about implementing this bill and a lot of the informed opposition comes from there and, frankly, if the Secretary of HEW were a woman, she would not announce that she could not do her job and then expect that was a good and sufficient reason to not take care of the children who need day care. Any woman who goes around announcing that she can't do her job is fired, and I think that it's a poor excuse that the Secretary of HEW feels that he should be able to come before this committee and continuously announce that he's unable to administer a program to take care of children and then feel that that's good and sufficient reason not to enact one. It's probably a good and sufficient reason to change Secretaries, but not a good and sufficient reason to leave children alone. (Laughter) The other thing that I think is really important in discussing child care is the whole question of why this problem can continuously be put underneath, and why those of us who are middle-income parents are continuously sort of left alone. I think when there are no services, which is the current case, there is no way to buy the kinds of services that are available for Audrey's daughter, for my son, because they just don't exist. And my son is in an after-school program with 15 other children, and the competition to get into these programs is far greater than it will ever be to get him into Harvard or Yale, because they have about 1,000 spaces for their freshman class, not 15 spaces. And you cannot tell me that poor people need spaces more than anybody else does because there just are no spaces that exist, so the need is equally great for all of us because we just don't have any commitment publicly to take care of our children. And we can't now cut back because of a President who's left the White House—our demands for the children that we know are out there. If we do, I think . . . as someone who works on women's rights, I have to say that I think it could only exist because the Congress of the United States thinks that women take care of children, that's a free service and there's no point in replacing a free service with one that costs any money at all, and it's really exploiting women as well as exploiting all the children that they primarily take care of.

CHMN: Thank you, Ms. Burris, for a very effective statement. I'm wondering then . . . you believe that there should be no problem about the budget, that it should get top priority and that it doesn't make any difference whether you're near-poor or poor, there's nobody that should get priority. They should all have this funding. What type of money are you thinking about? What . . . in other words, you obviously know the poor aren't going to be able to pay. The near-poor probably not either, but there are going to be able to pay. The near-poor probably not either, but there are going to be some that are of the middle class that might have to pay. No, what would you think would be a . . .

CB: If you look at our constituency as people involved in women's rights, the median income for women is literally half of what it is for men. The median income for women is around $5,000. For white men, it's around $10,000 and for black men it's around $8,000. Any one of us, by finding a man, you know, a live, walking-around man, doubles our income and that is, without doubt, you know, the reason so many female-headed households (and so you can see, I'll just do a list of them so that you can see), so many female-headed households live in poverty. So that if you're talking about our constituency, those of us at this table, if you take the social service . . . the Title 20 guidelines . . . there is no question in my mind that all working women, with the exception of maybe one or two percent at the very top, are going to easily be able to qualify for free care. And so, then, the question of deciding which women is going to get it is one that I don't see that I have to make. I just think that it's my responsibility to tell this committee of the need.

CHMN: Of course, there are the questions that come right back to us. We're going to have to make it if you're not going to. So, that's the purpose of my question because there's just so much money around.

CB: All right, I think I would put the top at whatever the Title 20 thing is: In New York, I think . . .

CHMN: I'm sorry. I didn't hear you.

CB: The Title 20 guidelines are 115% of need at the top. That comes out to about 15,000 in New York City. That's well over what any woman on the average is going to make. Those would fit without our guidelines of having to explain the need and have as the first set of need those women who are heads of households. I think from there you need some sort of sliding scale that, in the end, does not really have a tremendous burden on those families where two people work if they work at middle-class jobs—the people that Audrey said are those people who work out of choice. The other problems is that we do not have tax credits or an easy access to the tax deductions that are available for those of us who pay for child care. And so if it were a credit system because many more people file a short form than file a long form. Or if it were a system of credit even for home care, which it isn't now, you would at least be able to give me the same kind of deductions for my business expense (because I can't be here today without child care) that you give people who buy business lunches. I really resent paying for martinis and not paying for child care. And I think that if you had it as a system without a . . .

AF: . . . I'll just submit my statement and go to this question of cost. This is a good bill, I think, because it includes lots of child care services that are needed for children whether they're in a day care institution or whether they're cared for at home by their mothers. And the problem, I think, that we get into is that we almost pat ourselves on the back as middle-class parents about how much it cost to raise a child, on the one hand, and we say, "Look, we put out this much money to raise a child." On the other hand, if we do it publicly and put it under the guise of day care or child care, we think it's outrageous. Somehow, we've got to get our philosophies together. It seems to me if we talk about social services for all children as day care, day care is going to be equated as something way too expense and never passed. On the other hand, if we tell the public that we are providing not only day care for those children who need it, but social services, health care, medical care, and so on, for all children, we are saving the taxpayers, ultimately, dollars, though it may look expensive now. We are taking care of children, and I think we ought to look at this this as a child care bill, not as something that just helps mothers. It has always seemed to me that most children have two parents, one male and one female, and that the whole burden of the care of that child should not be just on the female and this looked at as a women's bill. This is a children's bill.

Chmn: Thank you, Ms. Fraser. I want to commend you, also, for your very cogent remarks. It's a great pleasure to have the wife of Congressman Don Fraser before the Committee.

AF: And the mother of a number of children, and I consider myself a day care worker.

Chmn: You said on page two of your statement that such schools should be opened to all children regardless of financial standing of parents. Do you feel that, even with the strictures on the budget, they should be open to all parents? Do you feel exactly like Mrs. Burris?

TS: Most assuredly. Absolutely. Our public schools are open to all children. I feel that early childhood development must be open to all children. I think that the statement that follows it clarifies one of the reasons I said that, and is a very reasonable one. And one that shows, in my county, anyway, why Head Start isn't working, and that is the fact that Head Start operates in a ghetto. It's keeping the poor children together and giving them very limited kinds of educational opportunities, and I would much rather see children of all economic backgrounds in the same classroom doing the same kinds of things. I think that this kind of thing . . .

EK: . . . half of the children in that center were under Title 4A, which meant that they were at the welfare level. But we did not want to see welfare families isolated. They're isolated already in their housing and many other ways. So 50% of the children in this center were on the sliding fee scale. Some of those families pay five dollars a week, some of them pay $[illegible] a week, but they pay according to what they could afford. That center closed within 10 months. Lots of people told us that it couldn't be done, and they were right. One of the things I like about the Child and Family Services Bill is that it looks like you're going to try to do what couldn't be done. And that is, provide not only for those families who are at the welfare level, but provide for those families who are above that level and who are the working poor. I'm very concerned when I see families like a mother that I know, and this is the third time she and I have talked about care for her pre-schooler. She is a certified teacher. She has to work. Her second husband is a student. He has a part-time job. They are willing to pay, and they want good care for their son. But I don't have any place to tell her to go. She and I talked last week and I found myself withdrawing from the conversation. It was too painful for me and for her, too. I think about an infant who came to our center. His mother is white and unmarried. She was a secretary at the time he was born. Her family was not willing to give her very much emotional or financial support during that period. And we really had to mother the mother. She almost gave up her baby. She considered giving him up for adoption. She considered abandoning him without the adoptive process. But we referred her to counseling. We took him for shots. We bathed him. We fed him. We sent special formula home with him because she was not willing to pay, or really able to pay for that at that time. And, through the support services that she received, she and her baby were able to become a family. And it looks to me like the bill that you're considering will be supportive of families. And I think that's important. I'm concerned about a mother who is a truck driver within our city, and she's desperate for care for her three-month-old son. For the last several weeks, she has carried him in the cab of her truck, but she says she can't keep doing that. We need a place for her baby. Those are some of the families that I know, and those are some of the reasons I have come to testify. Some of the particular parts of this bill that I think are important are these. As I have worked in a franchised center and in a non-profit center and in a Title 4A center, some of the needs for day care that I'm particularly concerned about are covered in your bill. And I'm very pleased to see the variety of prime sponsors. I'm very much concerned that no one sponsor be given the whole package. Our public schools have certainly not fulfilled the needs of all of our children. And then I am pleased to see the commitment to variety and innovation in programming.

CHMN: Mr. Gallagher, I have a couple of questions for you. Possibly the most important question that I can ask pertains to the program delivery system. In your opinion, what specific roles would the public schools have in any legislation we develop?

JG: I would see that over the long run the public schools will become more and more involved, but not as they're currently structured. I would see a great change take place in the primary grades and the earlier education of these youngsters, coming from a greater recognition of the overall comprehensive needs of the child. The child has health needs, has social needs. The family needs to be more critically involved in these kinds of programs. The schools as they are now structured would have a difficult time accepting this, but I think the schools can restructure themselves and I think it would be a great benefit to everybody if they did it in concert with the kind of provisions that are in this bill. I would not want to get this bill entangled in a professional battle between who owns this territory.

A: A key term in the legislation under study is "prime sponsor"—the direct link to the Federal agency giving out the money. Prime sponsors will be able to subcontract for services with other agencies in groups, but the power of the purse will be with the prime sponsors. Albert Shanker, the powerful head of the American Federation of Teachers, wants the public schools to be the only prime sponsor. Shanker told John Merrow that the public schools have two advantages—they already have the support of the middle class, and they have an established structure for governance. Shanker added that having all sorts of sponsors would lead to conflict. Those who want a variety of sponsors, Shanker said, are really trying to set up an alternate school system to rival the public schools. Shanker's call for public school monopoly has aroused strong opposition. And our sources on Capitol Hill indicate that, despite Mr. Shanker, or perhaps because of him, a public school monopoly of day care is impossible. Of course, everyone wants to be the prime sponsor. Sid Johnson is the Staff Director of Senator Walter Mondale's Subcommittee on Children and Youth, and he talked with John Merrow about the possibility that profit-makers would be eligible to be prime sponsors.

JM: It sounds as if Senator Mondale and those people who have been drafting the bill are leery of profit-makers in day care. Why?

SJ: Well, a number of groups concerned about this bill and active in the bill are quite concerned that large profit-making programs do not participate and, in essence, use limited funds in part for profits, and they point to the example under Medicare and Medicaid of nursing homes in which there have been some recent scandals in New York State and elsewhere where profit-makers could come in with very few checks and not have to meet standards, and not be subject to very much enforcement, and in some cases make a tremendous profit from public funds. So we do have what we hope is a very limited and carefully monitored approach which would permit you—that community—that prime sponsor—to select out a profit-maker for funding if, in their judgment, it met the standards, had the parent involvement and was just slightly better than a non-profit. One more point I would like to add on that (and I may be telling you more than you want), there are . . . day care is . . . contains some interesting legal fictions, you might say, with respect to profit-makers. It's not just like the automobile business when you talk about profit-makers being General Motors or a large corporation. There are large franchisers in day care who are profit-makers. There are also many, many, many small "mom and dad" or family day care operations which are classified as profit-makers simply because they have not filed for tax-exempt status. They may not have had a lawyer, they may not have gotten a 501-C3 status, and had a Board of Directors, but, in reality, they are not making a profit. They're making, in essence, a salary. So that is one reason, in order to encourage those programs to come in and be up-graded because that's where 60-80 percent of the children are today in day care. We have chosen not to exclude profit-makers totally because you would be excluding not only what people think of as large operators, but you would be excluding family day care—the mother down the block who watches fewer than six children in her home, which many parents prefer and which could use staff training and assistance and health attention.

JM: But, essentially, when you talk about profit, now you're trying to make it so that it's tough for the large franchisers to get money under this bill, but easier for the small "mom and dad" types?

SJ: Oh, no, that's not . . . if I left that impression, let me correct myself. It is going to be just as hard for any profit-making program—indeed, any program to be funded under this Act. One of the things that Senator Mondale and Congressman Brademas and the other sponsors feel most strongly about is that these programs have got to be of the highest quality. That we could well be doing damage to children if we permitted Federal funding to go to inadequately supervised, poorly trained custodial warehouses, whether those are profit or non-profit. So that profit and non-profits alike, family day care and big corporations and public schools will all have to meet all those standards, the exact same ones, and the only distinction is that if you are a profit-maker, and it's either family day care or corporation, non-profits will get a special priority.

A: William Pierce of the Child Welfare League and Wayne Smith of the National Association for Child Development and Education are on opposite sides of the dispute. Both are lobbyists, Pierce for the non-profit interests, Smith for the profit-makers. John Marrow talked first with Pierce.

JM: Is *for-profit* day care better than non-profit day care?

WP: No. For-profit day care, according to all of the studies that I have ever seen and all of the centers that I have visited, is by and large substantially worse than non-profit or publicly operated day care. Whether you take the study done by the National Council of Jewish Women, and they went into their study with no preconceived opinions, or the study done by a group of women in the Boston area, or our Child Welfare League's look at day care centers all over the country, what you find is that there are, indeed, a few good profit-making day care operations, just as there are, indeed, a few bad non-profit and publicly operated day care operations, but by and large you've got about five to six times better chance getting a decent day care service if you go the non-profit public route.

JM: What's wrong with . . . what are we likely to find in for-profit day care? You're saying it's substantially worse, but you really haven't documented that.

WP: You find the same thing in profit-making day care as you find in profit-making nursing homes. You find that the motivating factor is the bottom line—the bottom line being profit, the bottom line of profit being attained by cutting back on staff and on staff salaries, cutting back on the food, cutting back on the equipment, cutting back on the space, making sure that there is as little interference as possible in maximizing profit. That includes also that you have to cut back on consumer participation and consumer involvement in your program. In terms of consumer participation, we think it's critically important for consumers to always be involved in any kind of human service. This is particularly true when you're talking about a service for very young children. They can't speak for themselves, they can't object, they can't complain. It's important that their parents be able to walk into that center at any time, and look at the operation to complain. I have been in many profit-making centers. Most profit-making centers are extremely unwilling to let me, as a parent who says he wants to enroll his own child in a day care center, even in the door. And that includes operations in Maryland. That includes operations in California, Chicago, clear across the country. Time after time, representatives of the profit-making chains and the big profit-making operators have challenged me. They've said, "If you think our operations are so bad, come visit us." Well, I can tell you, I have visited them, and in case after case they have been breaking the Federal and state licensing laws by having too many children and too few staff. The food has been lousy, and the care has been, at best, custodial.

JM: The present situation of scarcity; does that allow profit-making day care to flourish?

WP: That's been the excuse in profit-making day care and in profit-making nursing homes. The condition . . . the usual argument is, "Well, it may be bad, but it's better than having them out on the streets." That's the same argument they've used to run warehouses for the aged for 25 years in this country and we say, "Stop the argument with kids." It's a Hobson's choice, and it's ridiculous.

A: That was William Pierce of the Child Welfare League. Wayne Smith, who lobbys for the *day care for profit* interests, also spoke with John Merrow.

WS: I hate to differ with these critics of the proprietary operators, because we found that time and time again the centers that run for a profit give quality care, and I think that's what the parents look at—quality care. And when they go into centers, and they judge that they want to send their children to a center, and if we are providing 70% of all of the day care in America, there must be something that the proprietary operators are offering over the non-profits and others that are in the field.

JM: Now, William Pierce, who is your counterpart in the Child Welfare League, was very harsh in his criticism of day care for profit, and he said that when he went to visit for-profit day care centers, he often couldn't even get in the door.

WS: Why, I think that's right, because Mr. Pierce is not a father, and he has no right to be in there unless, you know, he was looking for other reasons.

JM: I can't argue with that. Why, if for-profit day care works, as you seem to be saying, why is it that the Brademas bill and the Mondale bill are setting up pretty high hurdles to the eligibility of for-profit day care?

WS: I think that your big problem is that they're being excluded in the present Mondale-Brademas bill. Proprietary operators are being excluded and, therefore, that is why we are in opposition to the bill, in the sense that if we are going to be excluded, we'll be opposed to the bill. If we're included, we're all for the bill.

JM: Right now, then, you're opposed to the bill?

WS: That is right, unless it is amended.

JM: Now, the critics of profit-making day care point to Medicare and Medicaid and to the nursing homes as examples where when the profit-makers are let in or allowed in, scandal develops.

WS: I think you can find a scandal in anything, and if you want to look down at the White House or HEW or other agencies, I think you'll see enough scandal right there in the bureaucratic jungle that most of these agencies are made up of.

JM: Well, that doesn't really refute the charges about, for example, the nursing home scandals where patients are found to be kept drugged during the day so they won't cause trouble, and immense profits are being made by the profit-makers.

WS: Well, I think again the problem is that HEW, who funds the Medicare Program to the nursing homes that are proprietary-run or not run by profit-makers, are not enforcing the standards, are not enforcing the rules. And this is the problem we have today in day care, nursing, whatever the case may be, is that nobody's enforcing the rules.

JM: What do you conclude from that?

WS: I conclude that they're doing a very poor job of trying to dole out money, and then where are the rules that have to be enforced, if they're not licensed?

JM: It seems to me that the heart of the objection, which I'm not sure we've really dealt with, is the notion of the profit motive, or the bottom line of making money. Now, what it sounds like you're implying is that unless there are stringent rules and enforcers of the rules, the profit-makers are going to watch that bottom line and will cut corners and thereby reduce the quality of the care; at least that seems to me what you implied about the nursing homes. Isn't that likely to happen in profit-making day care?

WS: No, to the contrary—the money that is made in the proprietary end goes into quality care because they have to meet such rigid standards, licensing standards enforced by the states, or the local health and enforcement departments in the counties where they have their facilities. That's where the money goes today—meeting the high standards that states are asking the proprietary day care operators to put into effect. On the other hand, the double standard goes into effect. They do not ask the public-funded centers to meet any kind of criteria.

JM: Now, how likely is it that Mr. Brademas or Mr. Mondale will make changes in this bill?

WS: I think that the Committee, once they have a chance to listen to all sides of the argument of quality day care, take a look at the bill—and it's a very comprehensive bill, it's a 66-page bill . . . I think that it'll be a long year, and I think there'll be a lot of changes, especially when the Congressmen and Senators go home and start meeting with their operators to get the input on what should be done on quality day care.

JM: Now, you've fought this battle before. This bill went through the House and Senate before and you lost then.

WS: We lost then, but as you well know it's not law and that is because the President vetoed the bill and the Congress could not overcome the veto and . . .

JM: But the President didn't veto it because it didn't include proprietary day care.

WS: No, but at that time the big argument was the total amout of money that was being spent, and we agreed with the President that this kind of spending would just build another bureaucratic agency.

JM: Are you saying that you prefer to see a bill which didn't have any public day care at all?

WS: I think that the way it should be done and handled is that the money be appropriated and then contract out to the proprietor operators, at so much a day for the children, and they'll do the job they have done for the last 20 to 40 years because . . . remember . . . public day care didn't come into effect until the late '60's.

JM: So, you'd say it would be best to rely on the free enterprise system?

WS: I think the free enterprise system is what has been the success in America not only in day care but in anything else, because remember—it's the tax-paying entities that are supporting the tax-consuming fields, whatever they may be.

A: Sid Johnson, Staff Director of Senator Mondale's Subcommittee on Children and Youth, also talked about the profit-makers with John Merrow.

SJ: Senator Mondale and Congressman Brademas and all the sponsors have been very careful to say that the so-called delivery system question, that is what combination of state and local government, is one that we're really open to. We are seeking advice and suggestions that will lead us to a solution that involves and takes advantage of, the resources and the planning capacities of states and their existing programs, at the same time giving the flexibility that's so necessary for local diversity, for communities to adapt their programs the way they want. Now, that's a very easy goal to describe, but it's a hard one to work out. We're in the process of working that out. We've been very hesitant to have a sort of national blueprint that would mandate these programs run through the schools or mandate that they be run through the welfare departments. Some states, such as California, have a very large program of day care and early childhood education run through the schools. Other states do that through welfare departments, or through offices of children. This particular question is one involving how they will be delivered, and who will deliver them. It's our hope that all the groups and individuals and organizations interested in this bill will keep the purpose of it primary, and agree to sit down and discuss in hearings and other ways the sub-questions, important questions, but still sub-questions about who shall run the programs. I think you will end up with a very diverse system serving many income groups, which is precisely the point of this bill. We want very badly to provide a program that does not divide people into poor and non-poor. We want a single system. We don't want dual systems. I think the sponsors of this bill have seen enough examples of dual systems in health care or some other program where you have Medicaid for the poorest of the poor, and something else for those who aren't poor. And many people have said that if you have a program just for poor people, it ultimately becomes a poor program because it cannot sustain the popular support—the support of the public. It's viewed as being unfair and tilted, and we feel very strongly that, much like the public schools, this should be a program that serves all children.

JM: Now, Sid, this is something that Senator Mondale and Congressman Brademas and you and a lot of other people have been working on for a number of years. The bill has gone through once, and been vetoed, went through part way another time; now, I guess, it looks as if it is inevitable. When do you expect this bill to come up for a vote?

SJ: That's another hard question to predict because things change month to month. If you assume, for example—and this is a big *if*—that Congress would pass a bill of this nature, or something close to it, by June or July, and it would be signed into law, the next question, then, is when is the first effective year? For example, a number of groups have criticized the bill, saying that there's no need for a phase-in year, that the needs are so great and the capacity is there, that we should move directly into program operation. So that's an uncertainty. The second uncertainty is whether, indeed, the bill will be passed and signed into law. A third uncertainty is, if it is enacted, how would the Appropriations Committee respond to this in view of the other demands for resources? So it would be a mistake to predict in any sense, to lead anyone to believe that, at a certain date, money will be avalaible under this.

JM: So, anybody who is sitting at home waiting for the Federal funds ought not to be sitting there, ought to be out making day care arrangements in some other way right now?

SJ: Right. And they should be communicating with their political leaders, their congressmen and their senators. If they feel that this is a need that should be met, they should be doing everything they can to assist in passage of this bill, and to assure that the President signs it, and then you can't quit after that. Then come in and work for appropriations for it.

A. As important as the Child and Family Services Act is, and as great as the need for adequate day care is, it looks as if, for the next few years, the answer to our opening question "Who cares for children" is, bluntly, "not enough parents, not enough adults, and not enough politicians." Regarding the pending legislation, we are reminded of Carol Burris' testimony on Capitol Hill:

CB: We're all discussing once again this problem. And, in the meantime, I was the mother of a child who was a preschooler when this bill first passed. I'm now the mother of a second-grader and, if we keep on at this pace, I'm going to be the grandmother of somebody who needs day care.

C: Sometimes she comes home late, and I wait for her.

JM: Is your dad at home?

C: No.

JM: Does your Mom call up right away when you get home?

C: Not many times. She just calls and asks to see if we're all right, if we're okay. I tell her we're all right.

JM: Well, now, is your Mom at home when you get there?

Second Child: No.

JM: Does she work?

C: My parents are separated.

JM: And you live with your Mom or your Dad?

C: My Dad.

JM: Is he at work?

C: Yeah.

JM: What kind of work does your Mom do?

C: She works in . . .

(Music)

A: We want to use the final minutes of this program to tell you good news. We just won two prizes for our reporting on education. The National Council for the Advancement of Education Writing has awarded us first prize in the "Broadcast" category. We also won first prize for "radio coverage of higher education in 1974," an award given by the American College Public Relations Association, Mason-Dixon Section. And we have a prize of sorts for you, if you work in education. Our reporter, John Merrow, has written a work that has upset the traditionalists in teacher training. It's being published, along with replies by several prominent educators, by the National Institute of Education. NIE has agreed to send free copies of the book, *The Politics of Teacher Training*, to listeners who write in on official stationery. So, if you work in education and want a free copy of John Merrow's book, *The Politics of Teacher Training*, write us on your official stationery. And if you want a transcript of "Who Cares for Children?", send $.50 to the same address, which is: Options on Education, 1001 Connecticut Avenue, N.W., Washington, D.C. 20036.

(For "Options on Education," I'm Mike Waters. This program was produced by Midge Hart and John Merrow. Funds for the program were made available by the Institute for Educational Leadership of The George Washington University and the Corporation for Public Broadcasting. This is NPR, National Public Radio.)

STATE OF NEW JERSEY
DEPARTMENT OF EDUCATION
225 WEST STATE STREET
TRENTON, N.J.

OFFICE OF THE COMMISSIONER

SUBCOMMITTEE ON
RECEIVED
JUN 23 1975
CHILDREN & YOUTH

June 18, 1975

Honorable Walter Mondale, Chairman
Subcommittee on Children and Youth
Committee on Labor and Public Welfare
United States Senate
Washington, D.C.

Dear Chairman Mondale:

I am writing to you to supplement and support the statement of Mr. James Kagen of the New Jersey Department of Institutions and Agencies who testified on the Child and Family Services Act of 1975 (H.R. 2966 and S. 626) in hearings held by your subcommittee and the House Subcommittee on Select Education on June 16.

As Commissioner of Education for the State of New Jersey, I share the Department of Institutions and Agencies' view, as presented by Mr. Kagen, that the Child and Family Services Act of 1975 is an important piece of legislation which would promote the further development of early childhood programs throughout the country. The need for increased, and improved child care services for children is great, as you well know. As pointed out in the Department of Institutions and Agencies' testimony, our best estimate is that over 800,000 children in New Jersey under the age of 14 whose mothers either work or are AFDC recipients, need child care services.

As an educator, I believe early education and supportive quality child care services are important to the intellectual, emotional, and social growth of young children. Fortunately, New Jersey has long been a leader in providing early childhood education in our public schools. The First statute authorizing the establishment of public school kindergartens was passed by the New Jersey State Legislature in 1903. Subsequent legislation permitted local school districts to establish pre-kindergarten programs in 1943. Under our present school finance laws, the state reimburses local districts for a substantial portion of the costs of both kindergarten and pre-kindergarten programs. This year 103,000 youngsters are enrolled in public school kindergartens. An additional 5,000 pre-kindergarten aged children are enrolled in 356 regularly operating pre-school classes sponsored by 88 of our 603 local school districts.

In my view, the Child and Family Services Act will expand present child care services for the pre-school youngsters and provide after-school programs for school-age children. Unlike many of my colleagues, who hold as I do the post of chief state school officer, I do not believe that it is essential that child care services be necessarily tied to our present public school apparatus. And I do not feel that it is paramount that planning and coordination authority be vested solely in the state education agency. The major responsibility for the administration and supervision of child care services by statute in New Jersey rests with the State Department of Institutions and Agencies with whom we work closely and well.

My principal concern, and one that I share with the New Jersey Department of Institutions and Agencies, as represented by Mr. Kagen, is that this legislation, which I repeat is congruent with the high priority we in New Jersey have set for the improvement of services to children, nevertheless errs when it removes states from first priority as prime sponsors for child care services. For several years, we at the state level have been undertaking the difficult task of building bridges of inter-agency cooperation to ensure, for example, that child care services in New Jersey include a strong educational component. We are also at present developing joint accreditation procedures for early education teacher certification. And we are hoping to establish an inter-agency mechanism whereby the state can effectively assess needs, develop funding priorities for serving children in the greatest need, and create an array of alternative child care models to help improve the quality services offered to children throughout the state. These efforts, though slow in coming, bode well for the improvement of the delivery of quality child care services for the children of New Jersey.

The Child and Family Services Act, though crucial in securing a full-scale federal commitment to child care services, may well undercut our state attempts to provide quality child care services to the greatest number of children in need. The points made by Mr. Kagen, on behalf of the Department of Institutions and Agencies, are well taken. The bill as drafted may increase gaps and duplications in the delivery of services. By prescribing separate administrative procedures for local sponsors, the bill may be creating an administrative nightmare which will lead to more fragmented, and more expensive services. The bill's ambiguity with regard to the relationship between day care services provided under Title XX of the Social Security Act and those to be provided under the new legislation also may create some serious problems.

Further, the state role, as envisioned in the child and Family Services Act, regrettably could best be described as minimal. Under Section 103 (b), only 5% of the funds apportioned to each state will be available for planning, supportive services, and licensing enforcement procedures. These funds are further encumbered by the requirement that each state submit a grant application to the Secretary of Health, Education, and Welfare for approval.

Thus, it appears to me that, as presently proposed, the Child and Family Services Act counters the growing trend toward increased state responsibility. I welcome this development because I believe that the considerable federal attention and monies directed toward improving state level administrative and planning capabilities has paid off. We now have the capacity to do the job more effectively than our counterparts in Washington or those at the local level. The former are understandably often overwhelmed by the scope of their responsibilities, while the latter sometimes lack the vision to see beyond their particular domain.

The Child and Family Services Act is too important a piece of legislation to sidestep this important a piece of legislation to sidestep this important shift in the national system of determining and delivering needed services to children. However, I realize that the federal legislative history in regard to the provision of child care services is unique and presents you with a very special set of circumstances. You have faced a disinterested, if not openly hostile, administration. The lack of Executive cooperation has made your work these past six years more difficult.

Along with my colleagues in the New Jersey Department of Institutions and Agencies, I welcome increase federal attention to the vital needs of children, and believe that the Child and Family Services Act provides the kind of comprehensive multiservice approach to child care that our nation's children desperately need. It is my hope that these comments will be of service to you as you continue our important deliberations.

Please let me know if I can be of any further assistance to you in completing your work.

Sincerely,

Fred

Fred G. Burke
Commissioner

2397 -2405

STATEMENT BY MISS ALBERTA L. MEYER,
EXECUTIVE SECRETARY, ASSOCIATION FOR CHILDHOOD EDUCATION INTERNATIONAL
ON THE CHILD AND FAMILY SERVICES BILLS,
S 626 and HR 2966
September 1, 1975

The Association for Childhood Education International, a non-profit, professional organization of adults interested in the education and well-being of children, has approximately 30,000 members organized in more than 400 Branches, most of which are in the United States.

As an organization we are concerned with children from infancy through early adolescence. We have a long history of interest and work on behalf of young children, and recognize the vital importance of the early years. We are, therefore, especially pleased that S 626 and HR 2966 have been introduced to provide for services to children and their families.

In 1970 this Association published the enclosed position paper, The Child's Right to Quality Day Care. This is still our position because the circumstances outlined in the paper have changed little since that time. If anything, the need for services for children and their families has increased, as the number of mothers who work outside the home has grown. Under the present economy, this trend is likely to continue and therefore the need for more services for children will accelerate.

We are glad S 626 and HR 2966 are being considered by the joint committee. Our concern for quality prompts us to hope that Title II on Federal Standards for Child Care will strengthen the standards set forth in the Federal Interagency Day Care Requirements of 1968. The term "consistent with" in Sec. 201 (a)(2) may be a bit vague on this point, but the provision in Sec. 201 (a)(3) for submission to the Senate and House Committee does seem to safeguard the standards.

Thank you for permitting me to present this statement in behalf of the Association for Childhood Education International.

STATEMENT OF
TEEN-AGE ASSEMBLY OF AMERICA, INC.
RE: S. 626 - THE CHILD AND FAMILY SUPPORT ACT OF 1975

August 27, 1975

The Teen-Age Assembly of America, Inc. is strongly supportive of S. 626, The Child and Family Support Act of 1975.

For almost two decades the Teen-Age Assembly of America has worked with youth across the Nation to combat juvenile delinquency. One of its primary thrusts and successes has been in the area of employing the talents and capabilities of youth itself in seeking answer to what has become a growing problem in our Nation. Youth in America represent over half of the entire population and as the percentage of teenagers in the population has continued to grow, so has youth's involvement in crime. The disorganization and breakdown of the family unit often contributes to anti-social conduct in youth.[1]

As far back as the time that President Lyndon Johnson's Commission on Law Enforcement andAdministration of Justice released its Task Force Report on Juvenile Delinquency and Youth Crime it was recognized that it is "inescapable that the family is a vital component in any consideration of delinquency and delinquents."

"Given the need to make families function better and the impossibility of affecting them directly, the obligation and objective of our society must be to develop and provide the environment and the resources and opportunities through which families can become competent to deal with their own problems."[2]

In light of the fact that the relative strength or weakness of each individual member of the family unit will predetermine the family's capability of coping with the complex problems of modern-day living, it is essential that every effort should be

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1. Dynamic Patterns of Delinquency, Sheldon and Eleanor Glueck, p. 280.
2. Task Force Report: Juvenile Delinquency and Youth Crime, 1967, p. 46.

made by the community to afford the individual family members and the family unit itself maximum assistance in coping with the complex problems and conflicts which beset them.

In pursuance of this theory, the President's Task Force Commission on Juvenile Delinquency and Youth Crime, made the following recommendations:

"Efforts, both private and public, should be intensified to:

> Reduce unemployment and devise methods of providing minimum family income.
>
> Reexamine and revise welfare regulations so that they contribute to keeping the family together.
>
> Improve housing and recreation facilities.
>
> Insure availability of family planning assistance.
>
> Provide help in problems of domestic management and child care.
>
> Make counseling and therapy easily obtainable.
>
> Develop activities that involve the whole family together."[3]

Our Government has made a genuine effort at implementing some of the above recommendations; however, some remain unimplemented S. 626 incorporates the vehicle by which those recommendations which need implementation can become a reality.

The Teen-Age Assembly of America, Inc. believes that the American family is essentially resilient,[4] and if it is given the help it needs, it will be able to overcome the major problems facing it. It appears that the methods and techniques set forth in S. 626 are designed to give children and families the services necessary to give them maximum assistance.

Studies reflect that there is a direct correlation between the anti-social behavior in youth and conflict and disorganization within the family unit.

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3. Task Force Report: Juvenile Delinquency and Youth Crime, 1967, p. 46.
4. The Family, Robert Wernick, Chapter 6, p. 142

> "Besides the basic membership of the family, relations among the members also appear significant in determining the strength of familial influence. It has been shown that deep unhappiness between parents increases the likelihood that the children will commit delinquent acts and that children reared in happy homes are less delinquent than those from unhappy homes. Apparently, marital discord tends to expose the child to delinquent influences, perhaps by outright rejection or neglect or by undercutting his respect for his parents and so the force of their authority."[5]

The Teen-Age Assembly of America is convinced that one of the best steps in the direction of reducing delinquency amongst our youth is the strengthening of the family unit. As S. 626 provides children and families with services designed to keep families united, The Teen-Age Assembly of America strongly supports it.

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[5] The Challenge of Crime in a Free Society, A Report by the President's Commission on Law Enforcement and Administration of Justice, 1967, p. 63.

Association on American Indian Affairs, Inc.

432 Park Avenue South
New York, N. Y. 10016

MU 9-8720

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February 21, 1975

Senator Walter F. Mondale
Chairman
Subcommittee on Children and Youth
Room 443
Senate Office Building
Washington, D.C.

Dear Senator Mondale:

The proposed Child and Family Services Act of 1975 (S. 626) is of great interest to this Association. We would like to have the opportunity to present testimony at further hearings that we understand will be scheduled.

We are pleased to see that, in Section 103, funds are specifically reserved for Indian children and that, in Section 104, the Secretary may fund directly to an Indian tribe to carry out programs on a reservation.

The Indian child-welfare crisis in America is of massive proportions--with more than 25 per cent of Indian children living in foster homes, adoptive homes, or Federal institutions. In your own State of Minnesota, Indian children are placed in foster care and adoptive homes at a per capita-rate five times greater than non-Indian children. One in every eight Indian children in Minnesota under 18 years of age is living in an adoptive home; and, in 1971-72, nearly one in every four Indian children in Minnesota under one year of age was adopted. Many other states show the same or more grossly disproportionate rates of placement.

There are many and complex reasons for the Indian child-welfare crisis. The Senate Subcommittee on Indian Affairs will be examining a number of these and is expected to report legislation aimed at reforming the child-welfare services and practices that fall within the jurisdiction of the Senate Interior Committee.

It is our hope that S. 626 can begin to reverse the process whereby the integrity of Indian family life is undermined by the current administration of Federal funds and can aid Indian communities in developing locally-administered programs that will provide essential prevention and rehabilitation services.

Sincerely yours,

William Byler

William Byler
Executive Director

WB:re

Statement of Dr. Floyd E. Haberkorn, Assistant Executive Director
National Association for the Education of Young Children
Washington, D.C.
Submitted to
John Brademas, Chairman, House Select Subcommittee on Education
Walter F. Mondale, Chairman, Senate Subcommittee on Children and Youth
On The Child and Family Services Bills
S. 626 and HR. 2966
September 5, 1975

Mr. Brademas and Mr. Mondale:

Thank you for the opportunity to provide information relevant to the need for services authorized in S. 626 and HR. 2966.

The National Association for the Education of Young Children is a membership organization of over 25,000 persons who work in various capacities with and for young children, consistent with the stated purpose of the Association, "...to serve and to act on behalf of the needs and rights of young children...." The Association counts among its members, teachers, parents, paraprofessionals, researchers, social workers, professors, administrators and others who share a concern for the well-being of children.

The enclosed statement has not been formally endorsed by the membership of The National Association for the Education of Young Children, nor will it repeat the detailed statements of needs for services which have been presented in earlier testimony before the committees considering these two pieces of legislation. Rather, it reflects a point of view which has been expressed by various NAEYC members in recent years; this expression having taken the form of the Association's publications and annual conference presentations, communications from the membership to the Governing Board of the Association, resolutions adopted at the Association's annual business meetings, and public policy statements and actions by many of the Association's 175 Affiliate Groups throughout the country.

The point of view expressed in this statement is, essentially, that the federal government should initiate, through legislation, a program of comprehensive services to children and their families; that program to be funded and administered in cooperation with all federal agencies which impact on the lives of families in such a way that (a) the needs of children and families are met, (b) unnecessary duplication of services is reduced, and (c) the quality of life of each recipient is ultimately enhanced.

A COMPREHENSIVE PROGRAM OF SERVICES TO CHILDREN AND FAMILIES

The need for comprehensive services for children and families continues to be demonstrated in the research and in evaluations of programs now serving that segment of our population. One need only refer to testimony already presented to the House Select Subcommittee on Education and the Senate Subcommittee on Children and Youth to grasp the magnitude of that need. The testimonies of Mary Dublin Keyserling, National Capital Day Care Association; Marian Wright Edelman, Children's Defense Fund; Joseph Reid, Child Welfare League; Judith Helms, National Council of Organizations on Children and Youth; and Albert Shanker, American Federation of Teachers, present a particularly compelling picture of the existing necessity for comprehensive services to children and families.

Yet, any program of services to children and families, if it is to be truly comprehensive, must be responsive not only to the existing needs, but also to the conditions in which these needs were developed. Here again, the literature abounds with descriptions of those conditions -- in particular, the 1973 hearings before the Subcommittee on Children and Youth entitled, "American Families: Trends and Pressures, 1973." Responsiveness to the causes of current needs for services must change those conditions and not merely treat the needs which arose from them.

A comprehensive program must also give attention to the ways in which program components affect the ongoing lives of the service recipients; thus, coordination at the earliest stages of a comprehensive program becomes necessary. To provide educational or nutritional services, for example, outside of the context of the total needs of an individual or familiy or without due consideration of the impact of one service area upon another, is to believe that any one social condition exists to the exclusion of others.

The goal of any program of social services should be to so enhance the human condition for all who receive its services that the need for those services is reduced or eliminated over time. Programs should be designed so that recipients of services might gain access to services at the time they are needed and, once needs were met, exit from the services program stronger persons, more nearly able to assume greater control over the conditions affecting their lives. Ideally, programs should be responsive to changing needs and reductions in individuals' needs and be able to change and adjust accordingly.

Individuals who exit from service programs should be aware of the options available for their continued growth and, if possible, be put in contact with agencies which offer those options. Head Start, for example, gave rise to Follow Through programs in an effort to extend the gains in children's growth past their exit from Head Start programs. At the same time, Head Start has remained responsive to changing needs in its new populations of children. In many instances of social services programs, however, we have witnessed the exit of individuals from programs with no logical "next steps" available to them. Separation from one program often meant that individuals were provided with no coping skills in order to initiate actions which would be self-enhancing. Rather, many were left to wait until other programs -- welfare, unemployment compensation, etc. -- could recognize and respond to their needs. If we are to insure against future generations of children and families with the same unmet needs which are addressed in the proposed legislation -- if we are to avoid the "welfare begets welfare" syndrome -- then we must begin to view "comprehensive" programs of human services not only in terms of the number of separate services to be provided, but also in terms of changing needs over time.

The proposed Child and Family Services Bills represent an attempt to provide the type of comprehensive services program described in the preceding paragraphs. In the Bills' Statement of Findings and Purpose, recognition is given to the need for a dynamic program which provides choices for individuals and communities in a changing and complex society. Services are to be provided to persons who request them. Thus, this legislation reserves for parents and guardians certain choices -- choices as to whether to participate in the services program, and which of the offered services will best meet the needs of their families.

In the design for Child and Family Service Councils, the proposed bills honor one of the most basic of human rights, that of self-determination and control over the conditions which affect one's opportunities for growth and success. Implicit in this action is the recognition that the human services, unlike most other federal initiatives, must take a humane approach to implementation; and, if they are to be successful in accomplishing their stated goals, must consider the full range of human variables involved in the administration and receipt of services. Unlike most social services legislation before it, the current proposed legislation becomes inoperable without the recipients' involvement in the program's decision making processes.

COORDINATION

The Office of Child and Family Services, as described in Title I of the Child and Family Services Bills, presents an ambitious, some would say naive, approach to the coordination of human services -- ambitious because of the great number of federal directives affecting family services, not only in the Department of Health, Education, and Welfare, but also in the Departments of Agriculture, Defense, and other divisions of the federal government. Few federally funded programs for child care are responsible only to the Department of Health, Education, and Welfare. The Department of Agriculture's guidelines for nutrition services must also be taken into account. And, if one is involved in child care for dependent children of military personnel, there is another mixed bag of policies and regulations to contend with. At this writing, there is proposed legislation (S. 2250) sponsored by Senator Mondale which would increase funding under the Hatch Act for research into conditions affecting family life. I point this out because surely this act and others like it will provide valuable information for services to children and families. Any extensions of funding for future such projects should take into consideration the projects' potential impact on the total workings of the Office of Child and Family Services.

The proposed Office of Child and Family Services is seen as ambitious also because of the relatively short life span proposed for the Child and Family Services Bills' programs -- three years. This is a small time frame, indeed, in which to accomplish the kind of comprehensive coordination of governmental agences and services implied in the description of the office. The gross size of the task, combined with the to-be-expected "turf-guarding" by existing agencies have led to charges of naivete. One cannot be blamed for wondering at the outset what guarantees exist that the Secretary could expect the kind of cooperation implicit in the description of the Child and Family Services Coordinating Council. Once again, concern must be expressed for involvement by those "other appropriate agencies" which are referred to in Title I, Section 101, (b); agencies which may well reside outside the direct influence of the Secretary of Health, Education, and Welfare.

The above criticisms are founded in the frustrating experiences of hundreds of persons attempting to provide quality services to children through confusing and sometimes conflicting regulations between and within governmental agencies. Further attention to the magnitude of the task of coordination will do much to lend credibility to the proposed Child and Family Services Bills.

PUBLIC INFORMATION AND EDUCATION

In spite of the fact that provisions have been made in the Child and Family Services Bills for meeting a wide range of human needs, for providing choices for recipients of services, and for involving parents in the local administration of programs, there remains a need for an intensive program of public information and education. This need is dramatized by recent attempts by child care providers and parents to become involved in state Title XX Comprehensive Annual Services Plans. Their efforts were often hampered by a lack of accessible information which would have facilitated that involvement. If the Child and Family Services Bills are to be a viable instrument for providing services, then the federal government must build into such legislation provisions for publicizing the program and the means for gaining entrance into it, both for potential recipients of services and for the agencies which would provide those services. Such publicity must take forms other than legal notices in official newspapers if the majority of eligible service providers and potential recipients are to be able to participate in the services available to them.

Very often, families are kept so busy simply reacting to crises on a stop-gap basis that they have no time to stand back and view the total picture of needs and services. An effective program of public information and education about the services offered in the Child and Family Services Bills could enable such families to take advantage of offered services, and provide breathing time for examining the future direction of the family in terms of its goals and unmet needs.

DELIVERY SYSTEM

There is much concern among child care providers about the recent controversy over the delivery system to be employed in legislated services to children and their families. A part of that concern, naturally, stems from feelings of protection of existing programs and positions. However, the greater concern is that this controversy may well threaten the passage of much-needed legislation.

In June of 1974, a briefing was held on the 1974 versions of the currently proposed legislation. At that time, Mr. Brademas made an urgent appeal to the representatives of national associations of child care providers and parents who had gathered for that briefing. In essence, he said that unless the major associations' members and governing bodies could begin to cooperate on such issues as program goals, standards and delivery systems, the Congress would be hard pressed to pass legislation responsive to the needs of children and their families. He asked us to reflect on the image which we presented to Congress; one of in-fighting and cross-purposes if not self-serving motives. Since that time, we have witnessed among associations and individuals a new awareness of the value of joining together on behalf of children. There has been relatively broad support of a concept of prime sponsorship which allows communities options in selecting among service agencies; a concept which honors existing quality in programs and which permits a wide range of service agencies to participate in a federally funded program of services to children and families.

In light of this cooperative effort, it seems unfortunate that recent testimony pertaining to delivery systems, namely, public school participation, threatens to reopen the division between segments of the child services professions. Hopefully, a satisfactory solution to this situation can be arrived at soon. More unfortunate, however, is the fact that the controversy over delivery systems has detracted from the more serious considerations of the program goals of the proposed legislation. It is these very goals which should be the determinants of the delivery system to be employed. As such, they call for a flexible delivery system model which would involve many and varied agencies. These program goals should not be compromised by possible limitations of any one existing delivery system model.

In its descriptions of eligible prime sponsors and project applicants, the proposed legislation provides for participation by a broad range of social service agencies, both public and private. This is in keeping with the program goals of the legislation in that such participation approaches assurance that services will be comprehensive in scope. Yet, in order to guarantee this broad range of participation, consideration must be given to the development of criteria for selection of applicants by the local Child and Family Services Councils. Title I, Section 105, (b), (3), states that criteria for evaluation will be established by the Secretary. However, in order to be responsible to their local communities, assistance must be provided to Child and Family Services Councils in interpreting those criteria, while at the same time being responsive to local needs and conditions in relation to that most evasive of all criteria, "quality," as it is variously defined.

In localities where agencies exist to administer services, emphasis should continuously be placed on the prerogative of the Child and Family Services Councils to assess existing services according to program criteria, to suggest plans for coordinated delivery of services where applicable, and to propose the seeking out or establishment of new service agencies where none exist to meet those criteria.

The delivery system should be flexible enough to permit families to make choices among services based on their values and economic prerogatives. That flexibility should extend to permitting agencies to serve populations of potential recipients who may live outside of the usual geographic boundaries of the agencies, if in so doing the best interests of the recipients would be served and unnecessary duplication of services could be reduced.

The delivery system should provide for in-home as well as center-based services. Scheduling should be flexible so that recipients might enter or exit service programs as needs arise and are met, without restrictions which derive from fixed scheduling. The delivery system should be evaluated on the basis of changes in the quality of life of those served, rather than on gross numbers of recipients.

Criteria for staffing service agencies should receive due consideration by the Child and Family Services Councils. Emphasis should be placed on the competence of the persons who are to administer services, be they physicians, nutritionists, teachers or others. That competence should have been demonstrated in actual practice with children and families and demonstrate particular sensitivities to the needs of the population to be served. Considerations of the competencies needed to adequately provide needed services should not be compromised in favor of services agencies whose funding requirements might be less because of the lower level of staff competence. Also, the method suggested for the selection of project applicants insures that local Councils will be able to select from many services agencies and thus have the opportunity to apply the criteria of program quality and staff competence.

CONCLUSION

The above statement has attempted to respond to some of the human issues to be considered in legislation for child and family services. It has not dealt specifically with the issue of standards, although a point of view in regard to standards may be inferred from it. The details of any standards which would apply to comprehensive services for children and families must be carefully worked out by the Secretary within the authority granted him in Title I of the proposed legislation. It must be hoped that in the spirit of cooperation and coordination expressed so often in this legislation, the Secretary will seek out the assistance of the other government agencies involved in social services and the many individuals and associations who are directly involved in the provision of services to children and their families.

Nor has this statement dealt with the question of funding for so comprehensive and potentially beneficial a piece of legislation as this. It may be inferred, however, that a new look must be taken at the present recommended funding level. The proposed Child and Family Services Bills hold the promise of a level of comprehensive human services previously unknown in this country. Inadequate funding, or a funding level which would restrict the coordinated administration of comprehensive services would belie that promise.

The present economic condition of the United States dictates that conservatism be the watch word of any legislation. However, a review of the total condition of this country in the years since the inception of Head Start would reveal that the decline in the status of the country's economic condition has been accompanied by an increase in the awareness of a need for services to persons hardest hit by economic changes -- the poor and middle class. This is not to suggest necessarily a causal relationship between the two. Rather, it is to say that if we believe that social conditions are interrelated, we must also believe that solutions to the problems of a society must be advanced on many fronts at the same time. We cannot expect that the current need for comprehensive services to children and families will decline or even wait until the nation's economic condition improves. Let us expect, rather, that as the quality of the human condition in America improves, it will contribute significantly to the total growth of our nation.

American Nurses' Association, Inc.

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September 5, 1975

The Honorable Walter F. Mondale
Chairman, Subcommittee on Children & Youth
Senate Labor & Public Welfare Committee
U.S. Senate
Immigration Building A424
Washington, D.C. 20515

Dear Senator Mondale:

The American Nurses' Association wishes to take this opportunity to acknowledge your continued leadership in advancing services for children and to comment on S. 626, the Child and Family Services Act of 1975. There are a number of areas in S. 626 which are of particular interest to this Association.

The strengthening of family life and the involvement of parents in health and welfare services within their communities are indeed necessary and noble goals. Certainly, this Association is supportive of programs which would promote high quality services for children through a family centered approach.

Nurses in acute care settings, as well as those in ambulatory care settings, are oriented toward consideration of the entire family's physical and mental health including the impact of the environment upon their health. With this orientation, nurses are very attuned to the importance of the family as a unit and the necessity of family involvement in decision making which affects their well-being. We are, therefore, particularly supportive of the aspect of S. 626 which provides for services to both parents and their children.

We, too, are very concerned about duplication of federal programs and lack of coordination among them. If the Office of Child and Family Services within the Department of Health, Education, and Welfare provided for in this bill would bring about this coordination and would really avoid fragmentation and duplication of programs, it could be a very beneficial piece of legislation.

We believe that professional nurses could offer valuable assistance by serving on the Special Committee on Federal Standards for Child Care referred to in Sec. 201 of S. 626. Nurses in the community are the principal professional health care providers working with children and families of all economic strata in schools and in their homes and as such we believe that expertise would be an especially valuable contribution to this Special Committee.

A significant aspect of this bill is the inclusion providing for programs to be sponsored by Indian tribes and migrant agricultural workers. These two groups have often been difficult to reach for a variety of reasons and, therefore, it is encouraging to see these populations specifically targeted.

We would hope that inservice education and training assistance for professional personnel involved in child care could be an added resource for continuing education and could be coordinated with the federal basic education programs for nurses.

We hope these comments are helpful to you and the Subcommittee and ask that they be made a part of the hearing record.

Sincerely,

Rosamond C. Gabrielson

Rosamond C. Gabrielson, M.A., R.N.
President

RCG:mw

2425

A Plan for Early Childhood Education in Hawaii

A SUMMARY OF PROGRAM POLICIES
AND
PROGRAM ELEMENTS

Approved by the Hawaii State Board of Education

Prepared by:
Office of Instructional Services
Genevieve T. Okinaga, State Program Specialist
Early Childhood Education
DEPARTMENT OF EDUCATION, STATE OF HAWAII
February, 1975

APPROVED BY BOE - 2/20/75

Board of Education Regular Meeting - 2/20/75

INTRODUCTORY COMMENTS BY SUPERINTENDENT HIRATA

My recommendations on the plan for Early Childhood Education program are basically identical with what I submitted as tentative recommendations about a month ago. The changes are as follows based on reactions received from many sources:

1. Some shifting of priorities in the program proposals with the key change being a higher priority given to the community resource centers which received strong support from both public and private sectors including DOE district offices.

2. Instead of recommending endorsement of the general concepts of taxation proposals, we are recommending that these ideas be referred to the Governor as having merit for further study.

3. The addition of a recommendation to adopt the draft document, A Plan for Early Childhood Education in Hawaii, as a general guide for program planning.

The Proposed Plan document and my recommendations to you have received intensive review by early education teachers, directors, and planners in the State. Reviewers also included professionals in related fields of health, social work, psychology, medicine and others. Parent representatives in various professional and community groups were also included in the review.

During the planning and these final efforts of this project, we received many letters of support and commendation on the Department's Proposed Plan and tentative recommendations. We have not received a single letter of opposition. Also, we complied with every request for review.

From all evidences, two major public stances have emerged strongly. First, it appears clear, at this point in time, that the role of the Department of Education should be one of support services rather than direct services for the 4 year and younger with the exception of handicapped and economically disadvantaged children.

The second major public stance which appears to be called for is the need to recognize the family unit as the most important social institution for the young child and, therefore, to place parenting education as high priority. Discussions in this vein led to revising the community resource center proposal to service day care operators so that they can participate in parenting education in order to upgrade the parent education component in their own programs.

It also should be noted that I am not asking the Board to make commitments on the total estimated cost of each program element. Such a request would be premature. For most of the program elements, there are three phases of activities which will require Board decisions. The first is to research and develop a design; second, to pilot; and, third, to install on an incremental basis. Each phase should result in a report to the Board with recommendations for the next phase of activity.

This particular report is to request, among other things, approval for the first phase of activity, that is, research and development for those program elements which require it. Your approval will then mean that the Department would include these items into the supplemental appropriations request to the Governor. Then, in the Fall of 1975 when the Board reviews the total DOE supplementary appropriations budget request to the Governor, you will be able to consider these early education requests again but this time in the context of the total DOE programs. Therefore, the approved requests will be considered by the Governor and the 1976 Legislature.

2428

GEORGE R. ARIYOSHI
GOVERNOR

TEICHIRO HIRATA
SUPERINTENDENT

STATE OF HAWAII
DEPARTMENT OF EDUCATION
[illegible]
[illegible]

OFFICE OF THE SUPERINTENDENT

February 14, 1975

To: Dr. Richard Ando, Chairman, and Members of the Board of Education

Teichiro Hirata

From: Teichiro Hirata, Superintendent of Education

Subject: Recommendations on the Plan for Early Childhood Education Program--Board of Education Regular Meeting of 2/20/75

A. Recommendations

The Board of Education is requested to approve:

1. The general concepts of the proposed program items (white sheets) pages 1-8

2. The priorities recommended for phasing in the proposed program items (yellow sheets) pages 9-11

3. The initial program activities and funding which are to be included in the preparation of the DOE supplementary budget for FY 1976-77. This then means that when the Board reviews the total DOE 1976-77 supplementary budget request, it will be reviewing the early education items at that time in the total context of all DOE programs. (yellow sheets) pages 9-11

4. Recommendations to the Governor about several education-related issues which appear to have significant impact on the care and education of the young child (green sheets) 12-15

5. The draft document, A Plan for Early Childhood Education in Hawaii, to be adopted as a general guide for program planning. Adoption of this document means that this Plan will serve as an official working document to be continually updated and revised, including the incorporation of Board decisions. Adoption of this Plan does not mean the approval of any implementation activity except for those specific activities for which Board approval is granted.

B. Source of Recommendations

Most of these recommendations are derived, in whole or in modified form, from A Plan for Early Childhood Education in Hawaii prepared by the consulting firm of Dr. William G. Savard & Associates and the Office of Instructional Services. Three recommendations were derived from separate investigations, namely, (1) compulsory school attendance for 5-year olds, (2) manpower input into the Department of Social Services and Housing licensing team, and (3) the need for an effective statewide planning and coordinating mechanism for comprehensive services to children including medical, nutrition, health, social, education, recreation, and after school services.

Reactions to the Plan draft and tentative recommendations were received from many sources. They were considered in arriving at these final recommendations. Sources included members of the Board of Education; assistant and district superintendents and their staff; teachers, directors, and planners of state, county, and private early childhood programs representing the fields of social work, health, education and others; persons representing other State departments and units including the Department of Social Services and Housing, Department of Health, Circuit Courts, University of Hawaii and the Community College System; other public and private agencies and professional organizations such as the Hawaii Office of Economic Opportunity, Headstart Program staff and parents, the State 4-C under the Commission on Children and Youth, ILWU, Hawaii Community Action Program (HCAP) Directors; Health and Community Services Council; Aloha United Fund; Hawaii Association of Education of Young Children; Kindergarten and Children's Aid Association; Hawaii Baptist Academy; Commission on Status of Women. Reactions were received from persons residing in all major islands in the State.

C. Background Information

The Board of Education directed the Superintendent in 1971 and 1972 to develop a plan for children 4 years and younger including the mildly handicapped children who are in regular day care/preschool programs.* This Plan was to address itself to the issue of: "What should be the extent and nature of governmental responsibility for this group?" More specifically, "What should be the Department's educational support and direct services to this group?"

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*The other mildly handicapped, the moderately, and severely handicapped children are included in the Special Education Master Plan.

RECOMMENDATIONS FOR EARLY CHILDHOOD EDUCATION PROGRAM

A. Approval of the General Concepts of the Proposed Program

1. BOE approval is requested for CONTINUANCE OF THE BOARD'S CURRENT STANCE TO SUPPORT THE EXISTING LAW ON COMPULSORY SCHOOL ATTENDANCE WHICH DESIGNATES AGE 6 AS THE ENTRY LEVEL, AND NOT TO LOWER COMPULSORY ENTRY TO AGE 5.

   Rationale: This recommendation is based on four factors: (1) the continuing legal controversy and debate about the constitutionality of compulsory school attendance laws, (2) research findings in neurophysiology, visual, hearing, and mental development which conclude that, generally, children are not fully ready for academic activities (reading, writing, and arithmetic) until age 7 or 8, (3) comparative studies which show that early schoolers do not do better than their counterparts who start school later and (4) the increasing number of developmental psychologists and child development experts who do not consider the "school" as a superior setting for the very young as compared to a home or a substitute home except in extreme cases. "Experts" have found that young children need to be in family group sizes; also that they need a constant "mother" figure in order to develop a sound socio-emotional base.

   (All 7 DOE district offices concurred with this recommendation.)

2. BOE is requested to approve a policy stance that for the education of the 4 year and younger, THE DOE SHOULD, IN THE MAIN, PROVIDE SUPPORT SERVICES TO PARENTS AND TO OTHERS WHO PROVIDE CARE TO CHILDREN IN PUBLIC AND PRIVATE PROGRAMS: THAT DOE SHOULD NOT ENTER INTO DUPLICATING OR COMPETING SERVICES WITH THOSE WHO ARE ALREADY PROVIDING PROGRAMS FOR CHILDREN.

   Rationale: Direct services to children, such as a public school system for 4 year olds, would be contradicting what research studies have shown, as described in the preceding discussion. Our analysis shows that there is need to strengthen the family unit, the family care units, and not only the group day care/preschool programs.

   (All 7 DOE district offices concurred with this recommendation. Similar concurrence was found in a national survey of school administrators.)

3. If the preceding policy stance of BOE to provide support services is adopted, we request the approval of the following support services. This will serve as a general plan for program development of support services covering a period of 7 years. This approval means adoption of the general concepts and does not mean approval of the estimated expenditures.

Most of these support services will require development with some review of the literature and data gathering as the initial phase. It is for this phase that approval of expenditures will be requested. At the end of this development phase, a report will be made to the BOE, and recommendations on the next phase will be presented for Board action at that time. The approval for specific expenditures and recommended priorities are summarized on page 11, Table I.

Therefore, for the section which follows, approvals are requested on the general concepts of each support service.

a. TO DEVELOP AN AUDIO-VISUAL PACKAGE FOR TEACHERS AND PARENTS WHICH WILL ACCOMPANY THE DOE CURRICULUM GUIDE FOR EARLY CHILDHOOD EDUCATION, AGES 3-8. IT WILL BE SELF-INSTRUCTIONAL AND WILL BE USED FOR INSERVICE EDUCATION (10 sets; $20,000)

Rationale: The State's public schools and group day care centers use this Guide in planning their educational programs. We continue to receive requests for inservice education based on this Guide. The alternative of hiring personnel to do this is extremely costly. The cheaper alternative is this AV package which has the additional benefit of school administrators and center directors learning more as they conduct their own inservice workshops (10 sets; $20,000)

(Six DOE district offices concurred with this recommendation. Two districts gave this item high priority, but 4 districts rated the community resource center as a higher priority item. The remaining district proposed that this item be studied for its feasibility in a combined regional/community resource center.)

b. TO CONDUCT DATA GATHERING ON THE 4-YEAR OLD AND YOUNGER--AN EARLY CHILDHOOD EDUCATION INFORMATION SUB-SYSTEM TO BE TIED INTO THE DOE AND STATE'S INFORMATION SYSTEMS. (START-UP COST $10,000; OPERATIONAL COST PER YEAR $6,000) (DISCUSSION: PLAN DOCUMENT p 183)

Rationale: In spite of numerous studies in recent years, there is still no accurate up-to-date information on the 4-year and younger. This is because data gathering of each study is one-time efforts. There has been no serious attempt to establish an ongoing system that will automatically and continuously generate the necessary data.

We propose to develop and initiate an efficient and simple system that will support needs assessment, planning, and management purposes. Basic data should include number of children by geographic areas, kinds of service programs and their locations, funding sources, cost of day care services, etc. Some of this data should be helpful to parents seeking educational services.

In order to develop this system, we need to prepare a comprehensive design determining what kind of educational data is collected by different agencies as an ongoing effort, what missing educational data need to be collected, what the methods for data collection should be, how this data should be banked for easy retrieval and other such aspects which need designing in order to achieve an efficient system for collection, banking of information, and retrieval.

(Six DOE district offices concurred with this recommendation. The remaining district suggested that this item be examined for its feasibility in a combined regional/community resource center. Three districts gave this item high priority, but four districts placed the community resource center as higher priority.)

c. TO PREPARE, REPRODUCE AND DISTRIBUTE A DIRECTORY OF EARLY EDUCATION SERVICES BY ISLANDS FOR PARENTS AND EDUCATORS. ($15,000 START-UP COST; OPERATING COST PER YEAR $35,000). (DISCUSSION: PLAN DOCUMENT p 179)

Rationale: Many parents are not aware of or cannot find information needed to make good choices of early education and care services. The best existing "directory" is probably the telephone book which does not provide adequate information. We propose to prepare and distribute widely on a regional basis a directory which contains a brief description of the kind of service provided, and a guide to parents on how to select from among the available services.

(Five DOE district offices concurred with this recommendation. One district recommended that the AV package and the Information System be the Department's initial effort. The remaining district recommended that the feasibility of this item be examined in a combined regional/community resource center.)

d. TO ESTABLISH TWO REGIONAL RESOURCE CENTERS WHICH WOULD HAVE TWO PRIMARY FUNCTIONS OF (1) PROVIDING DIRECT CONSULTANT HELP TO PRESCHOOL/DAY CARE CENTERS, AND (2) PROVIDING PLACES FOR CURRICULUM RESEARCH, DEVELOPMENT, AND DEMONSTRATION IN EARLY EDUCATION INSTRUCTION ($304,000). THIS SHOULD BE A DOE-UH COOPERATIVE VENTURE WITH THE SPECIFIED FUND ALLOCATED TO DOE. (DISCUSSION: PLAN DOCUMENT p 138)

Rationale: Preschool/day care center directors and teachers are concerned about the quality of their educational and general management of program. Support services to them appear strongly warranted.

(Six DOE district offices concurred with this recommendation. The remaining district recommended that the initial DOE efforts be limited to the A.V. package and information system. Three districts suggested the idea of combining a regional with the community resource center for a given locale.)

e. TO ESTABLISH A NETWORK OF COMMUNITY RESOURCE CENTERS, approximately 40 of them to serve a geographic area roughly the size of a high school attendance area. It will serve parents, babysitters, home care units, and parent coops, and may include group day care center personnel. The establishment and operation of these centers will be contracted out to community or other groups qualifying according to criteria established by the Department. A basic plan would be set forth by the Department but considerable latitude would be allowed to provide for neighborhood differences ($2,288,000 plus $412,350 start-up cost). (Discussion: Plan document p 86)

Rationale: Research and experience point to the critical importance of the family, the mother or mother substitute figure, and the simulated family setting such as the family home unit operations. Government needs to provide an oasis of resources for these important persons, and the community resource center is envisioned to be such a center.

(Six DOE district offices concurred with 4 of them giving this item high priority. The remaining district recommended that DOE's initial efforts be limited to the AV package and Information System.)

f. TO ESTABLISH TEAMS OF SPECIALISTS TO SUPPORT TEACHERS WITH MILDLY HANDICAPPED CHILDREN, AGES 2 1/2 TO 5 WHO ARE IN REGULAR PRESCHOOL/DAY CARE CENTER PROGRAMS. ($922,600: 1 diagnostic/prescriptive teacher, 1 speech language therapist, 1 behavior therapist plus occupational and physical therapist services and existing clinics for 1,200 mildly handicapped children, 8% of 4-year olds.) (Start-up cost $100,000; operating cost $934,000) (Discussion: Plan document p 155)

Rationale: Every effort should be made to integrate handicapped children into regular settings rather than to segregate them. Segregation frequently labels the handicapped as inferior or different from non-handicapped children. This team of specialists can provide the necessary support to teachers so these children can function successfully in a regular setting.

No comment--
1 district

(Four DOE district offices concurred with this recommendation. One district made no comment except to indicate that this item should be consistent with the Master Plan for Special Education. The remaining district recommended that the DOE's initial efforts be limited to the AV package and Information System.)

g. TO PROVIDE EDUCATIONAL CONSULTATIVE SERVICES TO THE DEPARTMENT OF SOCIAL SERVICES AND HOUSING FOR DAY CARE AND FAMILY HOME CARE LICENSING AS PER DSSH'S REQUEST FOR OAHU, HAWAII, AND MAUI ($20,000--EQUIVALENT TO ONE FULL-TIME PROFESSIONAL STAFF).

Rationale: DSSH has requested repeatedly in the past for approximately 45 hours a month (10 plus hours a week) to have an early education specialist serve on their Oahu licensing team and 25 hours a month each for their Maui and Hawaii licensing teams. However, due to limited manpower, we have been able to provide only periodic consultative services and to be on call for special inspection visitations as needed by DSSH.

S346-23, Hawaii Revised Statutes does not mandate DOE to inspect day care centers as confirmed by the 11/30/72 opinion of the Attorney General's office. However, the Attorney General's office reiterates our concern that in spite of the interpretation of the literal requirements of S346-23, the question is one of effective regulation, that is, to have the standards meaningfully applied and enforced. And should DOE ascertain that enforcement of educational standards should be its concern, then a policy to enable fuller participation of DOE education specialists should be adopted.

Such participation is highly desirable and, therefore, recommended. It will require additional manpower; hence, the need for Board approval.

(Five DOE district offices concurred with the recommendation. One district did not comment on this item. The remaining district recommended that this item be studied for feasibility in the combined regional/community resource center.)

h. TO ESTABLISH COMMUNITY PARENT/CHILD SEMINARS AS AN ADDITIONAL OPTION TO PARENT EDUCATION. (Research/ Development $75,000; operating cost per year $192,500; program expenditure can be easily adjusted to the funding available in any budget period as there are no long-term personnel or other continuing commitments for operations and only minimal commitments for administration.) (Discussion: Plan document p 170)

Rationale: The basic plan is to have various community organizations, under contract from DOE, present pre-planned parent education programs to their interested members and others. The community organization would bear the costs of presenting the seminar and would perform certain recordkeeping functions. The DOE would provide the basic plan and packages of instructional materials; would provide instructor training; and would pay the organization a flat fee of an estimated $20.00 for each person who completes the seminar. The fee would be set so that the organization would make a slight "profit," thereby giving them an incentive to recruit students for the seminars.

This program adjunct, the Community Parent/Child Seminars, has many outstanding advantages:

(1) It involves the parents and community at both the planning and operational level, whereby the program can be more responsive to its consumers.

(2) It is a low-cost program where the cost rises only as the number of participants increase and complete the program. Further, the extent of the program can be easily adjusted to the funding available in any budget period as there are no long-term personnel or continuing commitments for operations, and only minimal commitments for administration.

(3) It is not designed to replace other parent education programs currently in operation, but would give each community an additional option to pursue parent education, with the community making the major decisions in this particular program.

Estimated coverage is 7,700 parents, 10% of either parent of the 77,000 children ages 0-4. (Reference: Plan document p 170)

(Five DOE district offices reported concurrence with two giving this item high priority. One district recommended limiting DOE's initial efforts to the AV package and Information System. The remaining district recommended that the feasibility be examined in the combined regional/resource center.)

i. TO CONTINUE THE BOARD'S CURRENT DIRECTION TO EXPAND PROGRAMS FOR QUALIFYING HANDICAPPED AND DISADVANTAGED 4-YEAR OLDS WHO ARE NOT PRESENTLY ACCOMMODATED IN FEDERAL AND SPECIAL-FUNDED PROGRAMS.

Rationale: This direction is still sound, but we have not been successful to date in expanding these programs. ESEA Title I funds are needed for supplementary programs for grades K - 12; Hawaiian Homes Act 4 funds are limited; other federal and special funds need to be searched out and aggressively sought.

We plan to continue efforts according to this direction. As stated by Honolulu district staff, we "need to look into the effectiveness of existing programs..." improve on them, and "...explore other means..." such as "...community resource centers, seminars, audio-visual packets, information bulletins, and television productions..." in cooperation with appropriate agencies.

(Five DOE district offices reported concurrence; 1 district expressed and another alluded that expansion of pre-kindergarten programs should not be at the expense of K - 12 programs.)

j. TO OBTAIN CONTRACTUAL SERVICES TO INCREASE MANPOWER NEEDS IN EARLY EDUCATION. The existing staff of 1 state program specialist in early education and a 1/2 time stenographer is not adequate to carry out any significant part of the preceding proposals. It is recommended that manpower be increased via contractual services rather than permanent staffing or temporar, positions, the latter which was recommended by the Plan draft. Once permanence of tasks is determined, permanent staffing and organization can be established.

Should most of the preceding proposals be adopted, the Board's February 17, 1972 position on staffing of a developmental team of four professionals and one stenographer is sound if augmented by one upper level clerical and two typists ($100,000). (Plan document p 222)

Board approval is requested for contractual services, but the amount of contractual services needed cannot be recommended until after the Board decides what proposals the staff is to carry out.

(Five district offices concurred; the remaining district recommends limiting initial efforts to the AV package and the Information System. The latter will require an additional part-time position in a higher clerical series - $6,000 operating cost. One district commented that temporary or permanent staffing should be delayed until the Governor establishes an effective coordinating body in early childhood. Another district recommended that the early education section should be responsible for only ages birth - 4; that K -3 should be separated; that the tasks for program planning for the 0 - 4 year is of "wide magnitude...will have to deal intensively with other departments and agencies of the State as well as private and public organizations.")

B. Approval of Priorities and Funding for the Inital Phase of FY 1976-77

1. PRIORITIES:

The priorities of the preceding program elements are listed on page 11. Top priority items recommended are the AV inservice education package, the Information System (data-gathering), Community Resource Centers, and Regional Resource Center. Please note that the Regional Resource Center does not require any funding the first year. This is because the research and development tasks will be done by the University of Hawaii, College of Education, Curriculum Research and Development Group as an on-going effort. Also, its existing resource center will serve as the State's pilot project. The funding asked for the following year will be required if the Board decides to set up another regional center as a DOE service.

The second priority items are the Directory of ECE Services and Teams of Specialists to Support Teachers with Mildly Handicapped Children in Preschool/Day Care Centers. Please note that the latter Specialists' Teams will not require research and development. This is because research and development information are already available as to how these consultative services might be delivered. Also, the University's preschool is already engaged in such activities.

The third priority items are the DOE Services to DSSH Licensing Activities and the Community Parent/Child Seminars. Although these two items are not considered less important, the need to establish priorities forces us to do this.

The last item of staffing in early education at the DOE state office is given top priority but listed at the bottom because this item, to a large extent is dependent upon Board decisions on the preceding proposals. However, we need to emphasize that the current staffing in early education of one program specialist and a 1/2 time steno is grossly inadequate even for providing here-and-now consultative services. With the increased concern and activities for the 4 year and younger in the last three years, and with 260 day care centers and more than 100 public agencies engaged in early childhood activities, the demand in volume and quality of consultative services in program planning, curriculum development, program implementation and evaluation has increased many times over. Ironically, as the Department became more effective in responding to the public's needs which are within the scope of our responsibilities, the volume and level of leadership sought by the public rose. Therefore, even for on-going activities, to maintain current level of consultative services will require a minimum of an additional full-time stenographer III ($10,000 per year) and a program specialist I ($15,000 per year).

However, at this session, I am not recommending any changes in staffing. This request will be made after Board decisions are reached on support services to be engaged in by the Department.

2. FUNDING:

For most of the program elements, there are three phases of activities which will require Board decisions. The first phase which requires approval is to research and develop program design; second, to pilot the design; and, third, to install the program on an incremental basis.

In reading Table I, the symbol ⊗ means to "start" the project; the symbol Ⓣ means the end of research and development or piloting or in two instances, initial installation and will require Board decision before we can begin the next phase of activity.

FUNDING IS REQUESTED FOR FISCAL YEAR 1976-77 ONLY FOR RESEARCH AND DEVELOPMENT ACTIVITIES (FIRST COLUMN, TABLE I). This Board approval means that we will be including these approved items in our request to the Board when the Department prepares supplementary budget requests for 1976-77. Upon your approval, they will be transmitted to the Governor and the 1976 Legislature. It should be emphasized that in this way, the Board is providing staff with direction for the preparation of the budget as an on-going activity as it reviews program plans. And when the total DOE budget request is prepared, the Board will be able to review these program proposals from the comparative view of all DOE programs.

The funding listed in the column, FY 1977-78, will be acted upon by the Board at the appropriate time after it receives a report on the earlier phase of FY 1976-77. Whatever funding is approved for 1977-78 will be incorporated into the 1977-79 biennial budget request to the Governor.

The FY 1978-79 funding will need to go the path of supplementary budget request to the Governor and the 1978 Legislature, etc. However, beginning with funding for FY 1979-80, the research and development, piloting, and in some instances the initial installation will be completed. Therefore, regular budgeting decisions on a biennial budget basis can be done.

TABLE 1

B. Approval of Priorities and Funding for the Initial Phase of FY 1976-77

Recommended Priorities and Tentative Time Phasing and Dollar Requirements of Program Elements

(Dollars, in Thousands) ⊗ = Start ⦶ = End of R/D or Pilot Period: BOE Decision Required

Priority	Item	FY1976-77*	FY1977-78	FY1978-79	FY1979-80	FY1980-81	FY1981-82	FY1982-83
1	A. V. package for teachers/parents to accompany existing DOE ECE Curriculum Guide; self-instructional package; to be used for inservice education (10 sets) (Ages 3-8)	⊗ 20 R&D and operate	0	0	0	0	0	0 →
1	Early Childhood Education - Information System (Data-gathering for 4 year and younger)	⊗ 10 R&D	⦶ 6 Operate	6	6	6	6	6 →
1	Community Resource Center for parents, babysitters, family care unit operators, day care operators, etc.	⊗ 25 R&D	⦶ 283 R&D and Pilot 20%	⦶ 764 Add 20%	1,222 Add 20%	1,675 Add 20%	2,396 Add 20%	2,288 Operate →
1	Regional Resource Center for research/consultative services/demonstration, resources	⊗ 0 R&D U.H.	⦶ 30 Pilot 10%	⦶ 91 Add 20%	152 Add 20%	213 Add 20%	306 Add 30%	304 Operate →
2	Directory of Early Childhood Education Services for parents, teachers, etc.	⊗ 50 R&D Operate	⦶ 35	⦶ 35	35	35	35	35 →
2	Teams of Specialists to support teachers with Mildly Handicapped Children, ages 2 1/2 to 5 who are in regular preschool/day care centers	⊗ 108 Pilot 10%	⦶ 309 Add 20%	⦶ 495 Add 20%	681 Add 20%	979 Add 30%	934 Operate	934 Operate →
3	Educational Consultative Services to DSSH for Day Care and Family Home Care Licensing (Oahu, Hawaii, Maui)	⊗ 20 Operate	20	20	20	20	20	20 →
3	Community Parent/Child Seminars	⊗ 50 R&D	⦶ 44 R&D and Pilot 10%	⦶ 57 Add 20%	95 Add 20%	133 Add 20%	193 Add 30%	193 Operate →
1	Early Childhood Education staffing manpower via contractual services (dependent upon the outcome of preceding proposals	⊗ 100 ?	100 ?	100 ?	100 ?	100 ?	100 ?	100 ? →
	Totals	383	827	1,568	2,311	3,161	3,988	3,880

*Appropriation for FY 1976-77 will be sought during the 1976 Legislative session.

C. Approval of Recommendations to the Governor of Non-Educational Solutions

Traditionally, educational problems are pursued by educators with educational solutions. Non-educational issues which emerge in the process of examining a problem are avoided on the basis that educators neither have the expertise nor the jurisdiction on such issues. However, today, the trend is to seek comprehensive solutions to educational concerns based on the premise that educational problems are caused by more than merely educational inadequacies.

In conducting this planning project, we chose the latter course. As taxation and other issues emerged as having indirect but nevertheless a significant impact on the care and education of the young child, we included them in our investigation. Further, the Board of Education as a policy-making body is charged with making policy stances in the name of public interest and the general welfare of the people of this State. Therefore, these education-related concerns which are not within the jurisdiction of the Department are included in our report to you.

1. The fiscal analyst for this planning project examined the financial problems relating to the care and education of the young child. TWO CRITICAL PROBLEMS SURFACED--FIRST, THE FINANCIAL PLIGHT OF THE "GAP GROUP" INCOME FAMILIES whose children could not qualify for poverty level special programs but, at the same time, because of limited income, they could not afford licensed family care units or group day care/preschool centers; and, SECOND, THE FINANCIALLY MARGINAL OPERATIONS OF FAMILY HOME CARE UNITS AND GROUP DAY CARE AND PRESCHOOL CENTERS which prevented these operators from improving their provisions for their children.

   THEREFORE, WE HAVE IDENTIFIED SEVERAL POTENTIAL PROVISIONS TO ALLEVIATE THESE PROBLEMS. WE REQUEST BOE TO COMMUNICATE TO THE GOVERNOR THAT THESE SOLUTIONS APPEAR TO HAVE SUFFICIENT MERIT TO WARRANT REFERRAL TO APPROPRIATE STATE AGENCIES. THESE AGENCIES MAY FIND THEM WORTH THEIR WHILE TO EXAMINE THE VARIOUS RAMIFICATIONS OF THESE PROPOSALS TO DETERMINE THEIR FEASIBILITY.

   a. INCOME TAX CREDIT TO "GAP GROUP" FAMILIES WITH CHILDREN IN APPROVED FAMILY HOME CARE UNITS (3,600 FAMILIES). The specific objectives of this item are 1) to provide means to allow "gap group" parents to utilize private family home care units, and 2) to improve the economic stability of home care units.

      These "gap group" parents are above the poverty level, but below the income level which can afford to pay for good quality care and education. The general idea is to grant state income tax credit for tuition spent at approved family home care units. The tax credits would be on a sliding scale based on income. For purposes of estimating, we have assumed an overall effect of a 65% credit on all tuition spent. This item will require the writing, introduction, and passage of tax legislation. (Start-up cost for research and development is $75,000; operating cost, $2,181,600.) (Reference: Plan document p 100)

b. GROSS EXCISE TAX RELIEF TO OPERATORS OF FAMILY HOME UNITS (Research/Development $75,000; operating cost per year, $256,000).

The specific objective of this item is to improve the economic stability of private family home care operations to better promote good care and education programs (8,000 children). These units operate on such economically marginal budgets that continuity and quality services are difficult to achieve.

At the present time, operators of family home care units are liable for gross excise taxes of four percent, the normal rate for professional services. It is proposed to reduce this rate to 1/2 of one percent, the rate charged for processing pineapples. The cash tax loss that would result by this reduction would be relatively small. The 555 children estimated to be in licensed units times .035 (the tax reduction) would be $1,369.75 per month. However, there would be substantial benefits. First, more of the family home care units could afford to become "honest" and seek licenses. This means that they would then be identified and, therefore, can be helped to improve their quality and participate in the Community Resource Center and Tax Credit to "Gap Group" provisions.

The family home care operators are also subject to other taxes, primarily social security, federal income, and state income. We have no proposal under study to alter these.

Should all operators whose capacity to service 8,000 children be granted this tax relief, the loss of potential revenues would be $256,000 per year with a start-up cost of $75,000 to develop the tax relief mechanism, test and evaluate it. It should be re-emphasized here that the potential revenue loss of $256,000 per year is not cash tax loss of current revenues. As stated earlier, most of our home units in operation are not licensed and do not pay any kind of taxes. (Reference: Plan document p 104)

c. INCOME TAX CREDIT TO "GAP GROUP" PARENTS WITH CHILDREN IN PRESCHOOL/DAY CARE CENTERS, APPROXIMATELY 8,000 CHILDREN 2 1/2 - 5. (Research and development $75,000, tax loss $6,928,000) The rationale is the same for tax credit to "Gap Group" families with children in approved family home care units. (Reference: Plan document p 149)

d. GROSS EXCISE TAX RELIEF TO OPERATORS OF PRIVATE PRESCHOOL/DAY CARE CENTERS. THE SPECIFIC OBJECTIVE OF THIS ITEM IS TO IMPROVE THE ECONOMIC STABILITY OF PRIVATE PRESCHOOL/DAY CARE CENTERS. TARGET GROUP OF CHILDREN TO BE AFFECTED NUMBER APPROXIMATELY 3,600 CHILDREN. THE PROPOSED SOLUTION IS TO REDUCE GROSS EXCISE TAX RATE ON PRESCHOOL/DAY CARE OPERATIONS FROM FOUR PERCENT TO ONE-HALF OF ONE PERCENT. REFER TO TAX RELIEF TO OPERATORS OF FAMILY HOME CARE UNITS FOR RATIONALE. (Research/Development $75,000; cash tax loss $165,600 per year) (Reference: Plan document p 152)

(Five district offices concurred with these four recommendations. Two districts did not respond to these items.)

2. A SECOND TYPE OF EDUCATION-RELATED PROBLEM EMERGED, THAT IS, THE NEED FOR THIS STATE TO HAVE AN EFFECTIVE BODY TO DO STATEWIDE PLANNING AND COORDINATION OF COMPREHENSIVE SERVICES IN EARLY CHILDHOOD, INCLUDING HEALTH/NUTRITION/MEDICAL, SOCIAL SERVICES, RECREATION, EDUCATION, AND AFTER-SCHOOL CARE. I recommend that this concern be communicated to the Governor with a list of major tasks facing the State of Hawaii as identified by our planning staff.

   a. Work should be continued on the Governor's Comprehensive Child Care Plan.

   b. Directions must be provided to the 1976 Legislature for a systematically planned development of the State's early childhood program.

   c. Existing federal funds need to be searched out and aggressively sought in order to minimize state fund inputs into federally qualifying projects.

   d. If the State is to be the central administering agency for the Federal Child and Family Services Act (should it become a reality), a master plan must be submitted to HEW. This preparation should already be in process by combining and adding to the existing Governor's Comprehensive Child Care Plan, the DOE Plan for Early Childhood Education, and other supplementary planning efforts, such as the Child Abuse Plan.

e. Re-examination of Act 209 is necessary to consider changing the role of the Commission on Children and Youth and its sub-committee, the State 4-C, from that of operational functions to that of advisory capacity, as expressed by several Commission members.

f. Should the above-mentioned evaluation reveal the need to amend Act 209 so that the Commission and the State 4-C be charged only with promoting and advising, rather than planning and coordinating services, a substitute vehicle to carry out these functions will be necessary. Approximately 16 states have established an office of child development in the Governor's Office by either legislation or executive order and, in several, initiated informally by the Governor. Only 4 states brought this about by legislation and the rest, 12, by executive order or informally by the governor. Such action should be considered to provide the State of Hawaii with an effective mechanism.

(Six district offices concurred, with 4 districts giving this item high priority. The remaining district responded that initial efforts be limited to the AV package and information system.)

COOPERATIVE EXTENSION NEW YORK STATE
Cornell University • State University of New York • U.S. Department of Agriculture

Cooperative Extension Association of Nassau County
300 Hempstead Turnpike, West Hempstead, N.Y. 11552
Agriculture 516-538-7401 4-H 516-538-7802 Home Economics 516-538-7481

Written statement of Barbara A. Pine, Cooperative Extension Specialist - Family Day Care, developer and administrator of the Cooperative Extension Family Day Care Program to the chairmen and committee members of the Senate Subcommittees on Children and Youth, and on Employment, Poverty and Migratory Labor and the Select Subcommittee on Education, U.S. House of Representatives regarding the Child and Family Services Bills, S. 626 and H.R. 2966.

Dear Chairman Mondale, Chairman Brademas and Committee Members:

You have already received much evidence about the urgent needs of children and their families for many support services. I am writing in support of the use of federal funds to provide these services specifically Bills S. 626 and H.R. 2966. I urge you to consider the broad scope of services which can be provided by a wide range of related agencies with resources to serve families and children.

For the past three years, Cooperative Extension and the College of Human Ecology at Cornell have been involved in a family day care pilot program in Nassau County on Long Island. Primary source of funding has been Extension Service - United States Department of Agriculture.

Although child care centers have been considered by some professionals to be the best way of caring for children, there are facilities for only a few. Rising costs of group care tend to make this option less viable for parents. It is now estimated that over 90% of child care takes place in a variety of home-based programs. This type of child care called family day care is the oldest, non-parental, out-of-home child care in our society. It is the most wide-spread, most used and the child care least studied and least supported. What began as part of the extended family system among relatives has become an informal, private, unstructured, isolated support to the nuclear and single parent family at all socioeconomic levels. It is a viable alternative and chosen by many families because:

- family day care gives the child more personal attention
- the care giver cares for the child the way the parent wants the child cared for
- it is more convenient in hours and location since it is usually in the parent's neighborhood or community

New York State College of Agriculture and Life Sciences, New York State College of Human Ecology, and New York State Veterinary College at Cornell University, Cooperative Extension Associations, County Governing Bodies, and United States Department of Agriculture, cooperating.

- flexibility in hours accommodates shift workers, school-age children
- several small children in one family can be cared for together
- care is available if a child is slightly ill or becomes ill during the working day (parent need not leave work or call an older child out of school).

This high use of family day care by the increasing numbers of working mothers with young children, increasing numbers of single parent families, changing patterns of family living, growing social and political pressures on low income mothers to seek employment rather than to receive welfare assistance, and the growing awareness of the importance of early childhood learning experiences are factors which caused Cooperative Extension to look at in-home child care arrangements.

The thrust of the pilot program has been to learn the strengths of family day care, the needs of family day care providers as they perceive them, to build the feelings of self-esteem and self-worth of family day care parents; to develop with them an informal, educational program and a certificate training course; to build a support network with the storefront resource center as the base; to help link the family day care providers into the existing community human services network and importantly to operate at the community level working directly with parents and assisting them to meet their child care needs.

Our program is open to anyone caring for children, however informal the care arrangement. In addition, we serve many families where both parents work to maintain a moderate income level, but who are often above the income guidelines for subsidized child care and referral services.

Operating out of a highly visible, yet non-threatening storefront resource center, this successful multi-faceted program has been developed with family day care providers, parents, Department of Social Services staff and community services agencies. Some elements of the program are:

- maintenance of a community-based resource center for family day care providers and parents
- providing a meeting place for family day care providers and parents to share ideas and experiences daily
- cooperating with the Nassau County Department of Social Services to offer a Certificate Training Course to family day care parents
- conducting an informal educational program planned with family day care providers and parents -- including meetings, workshops and trips to community resources
- offering planned activities for children while care providers attend training

- cooperating with the Day Care Council to encourage support of family day care
- providing training in child development to teen aides who work with children in family day care homes
- publishing a monthly newsletter to provide communication between family day care providers and parents which is mailed to over 400 people in Nassau County
- assisting parents in exploring child care options
- serving as a matchmaker between parents seeking family day care and family day care providers
- working with many community agencies to encourage support of family day care
- helping family day care providers gain access to the existing community human services network

The hypothesis upon which the pilot program is based is that when family day care providers and parents know you care, are easily accessible and are willing to work with them to develop an educational program, support and referral system which meets their needs, they begin to value the role of child care providers and quality child care. Both the providers and the parents learn about and more readily utilize services and resources available in the community.

In summary, I urge you to consider the importance of a local community-based comprehensive and coordinated approach to serving the needs of children and their families, and further to consider the viability of family day care as one option for parents whose children may especially need care in a neighborhood family-style setting.

Sincerely,

Barbara A Pine

Barbara A. Pine
Cooperative Extension Specialist
Family Day Care

June 19, 1975
Statement to the Subcommittee on Children and Welfare
of the Senate Committee on Labor and Welfare
and
The Subcommittee on Select Education
of the House Education and Labor Committee
by
The Honorable Jim Weaver

Mr. Chairmen, and members of the subcommittees, I want to thank you for the opportunity to testify this morning before your committees on the Child and Family Services Act of 1975.

I thought this piece of legislation so important, and the need for subsidized day care so great in my district, that I had my staff conduct a public hearing on the bill.

We were fortunate to have testimony provided by such witnesses as Marjorie Wright, Oregon State Chairperson for the Community Coordinated Child Care Council, and Mr. Jim Green from the State Children Services Division. We heard from public and private day care providers as well as volunteers and parents.

I would like to take this opportunity to convey the points that were stressed by the witnesses at the hearing.

1. There is a recognized need for subsidized day care in the state of Oregon. According to the Oregon Coordinated Child Care Council, only one-third the need for subsidized day care in Oregon is currently being met.

2. Training is necessary to have capable, qualified staff. However, funds for FY 1976 should be flexible. There should be a provision that if there is a sufficient number of trained staff available in an area, then that area should be allowed to spend their portion of the FY 1976 appropriations on direct child and family services, rather than further training. Oregon needs immediate direct child and family services.

3. There is a general and strong concern that the communities must have the ultimate decision-making power for the program. The witnesses reinforced the bill's provision to allow a combination of local governments to apply for prime sponsorship.

4. There must be a stronger assurance that a wide range of philosophies of teaching will be considered in contracting and apportioning funds by prime sponsors.

5. If this program is to be successful, there must be a conscious effort not to provide just another fragmented part of what is needed in child and family services. The bill's attempt to provide coordinated services is commendable. However, there

must be money specifically disbursed to the prime sponsors for the purpose of coordinating child care services in the community. The coordination of services cannot be stressed too much.

6. Parent participation on the decision-making level provides for a quality program. However, it is very difficult to obtain and maintain such requirements as having half of the parent policy council drawn from parents who are served by the project, unless there is strong encouragement on the part of the project staff.

Though I strongly favor protection of funds for direct services and not administration of services, money must be specifically allocated in one of two fashions -- either reimbursement to parents for their expenses to participate, or a stipend to the parents who do participate.

Sufficient funds must also be allotted to allow staff to have the time to train parents to work effectively on the councils.

7. The role of the proprietary in this bill is ambiguous. According to the Children Services Division, 50% of the day care in the state of Oregon is supplied by private, profit-making day care centers.

Proprietary day care centers should be given the same benefits as non-profit organizations. In Sec. 104 part 3, proprietary agencies in areas where prime sponsors have not been designated or have been found unsatisfactory should be able to apply directly to the Secretary for funds.

8. Small community-based centers that are walking distances for mothers and responsive to community needs are more desireable than large, centralized centers. Under Title III, if a new facility is to be established a provision should be included to provide an incentive to encourage small, community-based day care centers.

9. Minimum standards of quality are necessary, as long as those standards are measurable, and they are flexible enough to take into consideration the differences in teaching methods and learning needs of the children being served.

I would strongly support the Child and Family Services Act if it included the alterations that I have mentioned in my testimony.

SENATOR
[illegible]
Sep 8 2 46 PM

BOYS' CLUBS OF AMERICA

TEL. MURRAY HILL 4-4400 771 FIRST AVENUE · NEW YORK, N. Y., 10017

September 3, 1975

Senator Walter F. Mondale
Chairman
Senate Subcommittee on Children and Youth
United States Senate
Washington, D. C. 20510

Dear Senator Mondale:

Boys' Clubs of America is grateful for this opportunity to demonstrate its support for enactme[illegible] the Child and Family Services bills, S. 626 and HR. 2966. These measures have been designed to provide needed services specifically for the children and families from which our agencies obtain their largest membership. Boys' Clubs are traditionally located in areas of socio-economic deprivation, and currently serve many of the groups which are the focus of this legislation: migrant workers, Spanish-speaking and other bilingual groups, Indians, handicapped, as well as the non-minority families of poverty. We, also, believe in the need for serving a child in the context and with the support of his total family environment, and feel the enactment of this legislation would go far to stimulate a new emphasis among public and private agencies to strengthen programs based on family design and involvement.

Information on our clientele gathered in a 1974 Health Education and Services Survey supports the need for the kind of services authorized by the Child and Family Services Act of 1975, with priority given to families with greatest economic or human needs:

.25.6% of our members come from families with incomes under $4,000 per year.
.40.2% come from families with incomes between $4,000 - $8,000.
.20.1% come from families with incomes between $8,000 - $12,000.
.62.6% live in large and medium-size cities.
.10.1% are 7 years of age or under.
.30.6% are from 8 - 10 years of age.
.33.1% are from 11 - 13 years of age.
.26.2% are 14 and over
.44% come from families where only one parent is present in the home.

Senator Walter F. Mondale
September 4, 1975
Page 2....

The Act's emphases on parent involvement and participation, local coordination of services, and the development of comprehensive child and family service plans draw our support as essential elements for effectiveness. Our three-year Education for Parenthood program, sponsored by a demonstration grant from the Office of Child Development, has also underscored the need for family members to be actively involved in their mutual growth. The expanded child care concepts and programs included in this legislation seem to offer what we have found to be needed opportunities for older youth to become involved in their communities as volunteers or aides in a caring role with younger children.

We also support the concept of minimum Federal Standards for Child Care and the uniform minimum code for facilities. We look forward to working with the new Office of Child and Family Services in the development of these concepts, as well as in determining a role for our organization in carrying out other programs and functions for which the Act has been designed.

Sincerely,

William R. Bricker

WRB/sr

William R. Bricker
National Director

STATEMENT OF THE
MARYLAND COMMITTEE FOR THE DAY CARE OF CHILDREN
CONCERNING THE CHILD AND FAMILY SERVICES BILL OF 1975

The Maryland Committee for the Day Care of Children wishes to express its earnest support for the Child and Family Services Bill of 1975 S626 and HR2966. We feel that passage of this Bill is vital to provide the basic educational, physical, emotional and social nurturing that all children need to grow into stable, contributing, responsible adults.

To move toward a society cast in this mold, we will have to face the issue of cause and effect. We now know that what we do with our children in the earnest developmental years, determines their physical health and growth, the attitudes, the habit patterns, the character, and motivation as they grow to adulthood. We also know that experiences from infancy on can deeply affect the emotional stability and intellectual capacity of later life.

The experiment of Dr. Richard Heber of Milwaukee, gives dramatic proof of the importance of early experiences. Dr. Heber worked with children of retarded mothers - mothers with an IQ of 70 or below - whose children would have been expected to fall within the range of retarded or slow learners. The special program supplemented what the mother was able to give the child. A very low staff child ratio - one to one during the first year, then gradually increasing - enabled the children to develop the sense of trust and security which is the basis for all other growth and learning. A systematic program widened the infants' experiences and encouraged communicative ability. At the age of five and a half, these boys and girls tested at 124 IQ points - average! Light years in potential from their mothers' limited ability to cope with life.

Those who argue that passage of this Bill would destroy the family are ignoring the fact that many families are already affected by changing patterns of living. Others have testified to these changes, particularly Dr. Urie Bronfenbrenner of Cornell University.

We would like to add statistics from Baltimore - statistics which are replicated across the country - 43% of babies now being born are born to single parents. The average age of these mothers is 16½, adolescents themselves, too immature to be able to nurture an infant in the ways which give the security and growth opportunity needed as the basis for later learning and earning.

More mature, financially established couples are having fewer babies. As Betty Schwarz pointed out in an article in Child Welfare, the population is now fermenting a society in which considerably more than two-thirds of the next generation will have been disadvantaged from birth, if present trends continue. Many will become hostile and mentally and physically ill. The fact is that an increasing number of those having children today are the least prepared to raise children. When today's infants reach adulthood, two-thirds, Mrs. Schwarz predicts, will be dependent upon one-third of the next generation, because we will not have provided what children need to grow.

The only way in which we can intervene in this tragic scenario - tragic for the children, their families, and tragic for all those who will live in the same community with them - is by passage of the Child and Family Services Bill of 1975, and eventually by adequate funding for essential services.

We must invest in our children, when it is possible...to provide them with opportunities in the direction of fulfillment of their inherited potential. If we do not, we are condemning them, and ourselves to continuing increases in welfare rolls, crime, drop outs and addicts. Not the fault of these children, but through our fault as a society. Through negligence!

Society has long accepted its responsibility for childrrn *after* the child is damaged or the family broken. The Child and Family Services Bill would provide support services to be used voluntarily by the family. Services which could help *prevent* traumas, individual tragedies, the high cumulative *cost* of each and help before a crisis is reached.

We would like to urge that S 626 and HR 2966 be passed this year. We pray that its sponsors will not put off the battle for little children which has already been delayed too long.

The MCDCC urges that Education should be one option, but not have the exclusive monopoly for prime sponsorship. This issue has only arisen this year. The historic providers of day care have greater experience and knowledge in the field and a great contribution to make.

The MCDCC does not approve of making it possible for profit making centers to be established with public money. We are opposed to government subsidy of the private, for profit sector. We have found in Maryland that purchase of care from established profit making centers can be beneficial *when* these centers conform to Federal Standards. We do not mean to imply that we oppose private profit-making day care centers, since some people can and are willing to pay for such services, but such centers do not provide a basis for a comprehensive day care program. The concept of efficient, economical, national distribution of day care in a manner similar to the distribution of fried chicken does not square with the realiites of day care. Such a notion also runs counter to the idea of local control of the center and parent participation in the decisions that affect the operation of the centers. At their best, Head Start programs are good models of local control of a nationally funded program.

Proper supervision, consultation, training, and licensing is necessary. We feel that a differentiation should be made between centers operated by the owner, and franchised or chain operations, where primary committment is the profit motive.

We also urge that differentiation be made between for profit centers and family day care homes. Family day care homes are not profit making operations, since expenses and time are not fully compensated by fees. Only a few family day care homes are operated by public and non-profit organizations. Most are available on the open market. We urge that training, in service training, licensing and support services be available for family day care homes, which are meeting a major proportion of current day care needs.

Monitoring and evaluation should be specifically spelled out to provide adequate staff for enforcement of licensing standards.

We support the establishment of an Office of Child and Family Services by law and urge that the legislation mandate that its Director be designated as an Assistant Secretary or at least have direct access to the Secretary.

NEW YORK STATE EXECUTIVE DEPARTMENT
DIVISION FOR YOUTH
[illegible] AVENUE
ALBANY, NEW YORK [illegible]

PETER B. EDELMAN
DIRECTOR

SEP 12 [illegible]

September 5, 1975

The Hon. Walter F. Mondale
Chairman
Senate Subcommittee on Children & Youth
United States Senate
Washington, D. C. 20510

The Hon. John Brademas
Chairman
House Select Subcommittee on Education
United States Senate
Washington, D. C. 20510

Dear Senator Mondale:

Thank you for the opportunity to offer our comments on the Child and Family Services Bills, S. 626 and HR. 2966.

The Division for Youth is primarily concerned with the rehabilitation of delinquent and delinquent-prone children and the prevention of delinquency through youth development and delinquency prevention programs. The latter programs are funded jointly by the State and our municipalities, with the State reimbursing 50% of approved expenditures.

The major thrust of this legislation is to provide services for the family thereby preserving the family structure. The Division is very much aware of this need. We see the effects of unstable family life each day that we work with children in our facilities.

The legislation does not specifically mention the special need for family supportive services where the family has one or more members who are delinquent or delinquent-prone. Special services provided to these families could prevent children from being institutionalized and insure greater hope that children returning to their homes from rehabilitative facilities have the best possible chance of not recidivating. If the legislation could be amended to make note of this special problem, we will be in favor of it.

In terms of specific provisions of the bill, we would like to make note of the following:

1. p. 5 -- We would like to call your attention to the fact that the Child and Family Services Coordinating Council does not contain a representative from the Office of Juvenile Justice and Delinquency Prevention, created pursuant to Public Law 93-415. In light of our concern over the effect of lack of family services upon delinquency and the fact that the age range to be covered by this legislation includes the ages during which most delinquency begins, input from the federal juvenile agency could be a valuable resource. This is especially true as the new juvenile delinquency act is committed to deinstitutionalization and community services for children.

2. p. 7 -- This legislation provides that funds will be available for the establishment of group homes and also that services provided pursuant to this legislation must be of a voluntary variety. In New York State legislation has existed for many years which authorizes the creation of voluntary programs for children who have not been adjudicated as status offenders or juvenile delinquents (New York State Executive Law, Section 502). Children enter these facilities on a voluntary basis. These programs have the advantage of providing services at a critical time prior to the need for court intervention. In developing the guidelines for implementation of this legislation, if it is enacted, we would encourage that funds be made available to foster this approach; that is, voluntary, community-based group homes for pre-delinquent children, where the child and the family could be helped to resolve their underlying problems.

3. There are concepts enumerated in this legislation involving parent participation in the development of programs affecting their children and for the dissemination of program information to the parents. We hope that funds will be available under this legislation for agencies such as the Division for Youth which would like to move toward greater voluntary parent participation in the rehabilitation process. Programs of this type could include the transportation to, and housing of parents at, facilities, where their children are being cared for, in order to strengthen family bonds and make the transition from institution to community easier for both the child and the parents.

4. p. 14 -- In considering prime sponsors we would like to suggest that in New York State youth bureaus, which are jointly funded by the State and the municipality, be considered. Youth bureaus are responsible for coordinating youth service and recreation programs within a municipality (New York State Executive Law Section 420). If youth bureaus were to seek funds under this legislation to develop programs that involve the whole family, they could do much to further the purposes of this act.

5. p. 18 -- In developing the comprehensive plan called for in this legislation, we would like to reiterate our feeling that part of this comprehensive plan should include programs for families with delinquent and delinquent-prone children. We would prefer to see this made a mandatory component of all comprehensive plans under this act.

6. p. 26 -- In New York State the Division for Youth funds recreation and youth service programs on a shared basis with municipalities. Under the New York State formula, we make no charge to participants. If the legislation you are proposing is enacted, we would be interested in following the effect the development of a flexible fee schedule, based upon income, will have upon the program and whether evaluations indicate the fee schedules enhance or diminish the effectiveness of program.

7. pp. 37-38 -- We note that funds are available under this legislation for construction and acquisition. We would encourage funds under these provisions to be utilized for the establishment of group homes for delinquent-prone children who would attend on a voluntary basis. It will be very important in this regard for the uniform minimum code for children's facilities called for on pages 44 and 46 be developed. If this point is reached, we would welcome representatives of the Office of Child and Family Services to visit the urban homes developed in New York State by the Division for Youth.

8. p. 51 -- The legislation provides that funds be made available for research to test alternative methods for providing child and family care. In this area we would like to recommend the development of professional and homemaker services that could be delivered within the home as an alternative to removing children when families find it difficult to cope with stress and face the possibility of disintegration. If this could be done, many children who get into trouble as a result of a weak family structure could be saved from institutionalization.

9. p. 54 -- In regard to the training of personnel, we would like to call your attention to the need to train foster parents, especially foster parents who can provide homes for delinquent children who cannot return to their parents or have no homes to return to. These children are often exceedingly difficult to care for and foster parents who undertake this responsibility are in great need of specialized training.

The Hon. Walter F. Mondale
The Hon. John Brademas
p. 4
9/5/75

In conclusion we would like to state that there are many innovative and needed provisions contained within this legislation. We have commented to the extent that these provisions could possibly affect the area we are statutorially mandated to serve. It is our hope that these comments will be useful in your deliberations.

Sincerely,

Malcolm S. Goddard

Malcolm S. Goddard
General Counsel
and
Director of Ombudsmen

MG:VH

THE AMERICAN DIETETIC ASSOCIATION
430 NORTH MICHIGAN AVENUE, CHICAGO, ILLINOIS 60611
TELEPHONE: 822-0330

September 18, 1975

The Honorable Walter F. Mondale
United States Senate
Washington, D.C. 20510

Dear Senator Mondale:

In response to your request of August 1975, I am writing on behalf of The American Dietetic Association concerning the nutritional services proposed in your Child and Family Services Bill, S. 626.

The American Dietetic Association recognizes the urgent need for quality food and nutrition services in all day care centers. We have supported the recommendations for day care centers set forth in the final report of the 1969 White House Conference on Food, Nutrition and Health.

We recommend that quality child care include: early intervention, diagnosis and treatment of disease and disability before treatment becomes impossible or expensive; insuring a balanced diet for children to meet their nutritional needs and providing an educational experience.

Quality child care is preventive, and from a purely economic standpoint, prevention is the best medicine against inflation. It is well known that prenatal nutrition and early intervention are crucial to the healthy development of all children. In view of that, quality child care should include nutritional counseling for mothers to prevent a host of diet-related birth defects. In establishing, maintaining and operating child and family service programs, food and nutritional services meeting nutritional recommendations for clientele should be included if the service is provided during a normal meal time. For example, if a child is in a day care facility from 10:00 a.m. to 2:00 p.m., he should receive a lunchtime meal designed to meet his nutritional requirements. The foodservice should provide a laboratory for the teaching and learning about food and nutrition. The environment in which food is served to the child should be conducive to optimal consumption of the food and to the formation of healthy attitudes towards food and eating.

2460 - 2463

The American Dietetic Association recommends that a nutritional assessment be an essential part of health evaluation of all children admitted to day care centers. In addition, when ongoing medical treatment is provided the nutritional assessment should be a vital part of this program which would include dietary counseling by a qualified dietitian as part of the physician's treatment plan.

The American Dietetic Association has taken the position that the development of food and nutritional standards for day care centers should be under the leadership of a qualified dietitian and that all agencies charged with the responsibility of regulating and monitoring food and nutritional standards in day care centers should employ professionally qualified dietitians who function at the administrative and policy-making level in discharging this responsibility. All day care centers providing food care service, nutrition education programs, or medical treatment programs should have the services of a professionally qualified dietitian on a full time or regularly scheduled basis. Our members who have reviewed this bill have asked if this legislation would create new channels of government rather than more efficient utilization of that which currently exists?

I have attached copies of the position papers of The American Dietetic Association on (1) Food and Nutrition Services in Day Care Centers and (2) Child Nutrition Programs. The American Dietetic Association is committed to its responsibility for promoting optimal nutritional status of children and recognizes that an adequately nourished body is essential to physical and emotional health. All children need adequate food and educational opportunities to learn good food habits.

The American Dietetic Association thanks you and Representative Brademas for your continued leadership in the effort to achieve needed services for children and their families. If we can be of further assistance to you, please contact Mr. Robert Barclay, our Washington Representative (547-0335), or Jeanne Kruhm, our Washington Liaison (451-3671).

Sincerely,

Elsie B. Haff

Elsie B. Haff, R.D., President
The American Dietetic Association

Attachments: (1) Food and Nutrition Services in Day Care Centers
(2) Child Nutrition Programs

AMERICAN PUBLIC WELFARE ASSOCIATION

1155 Sixteenth Street, N.W. • Suite [illegible] • Washington, D.C. 20036 • Telephone: (202) 833-9250

SEP 25 10 02 AM

September 22, 1975

The Honorable Walter F. Mondale, Chairman,
Subcommittee on Children and Youth
433 Russell Senate Office Building
United States Senate
Washington, D.C. 20510

Dear Senator Mondale,

The National Council of State Public Welfare Administrators of the American Public Welfare Association appreciates the opportunity you have extended to us for comment upon the Child and Family Services Act(s) of 1975 (S. 626 and H.R. 2966), particularly with reference to alternative delivery systems for such services. The observations that follow are based upon the deliberations of a task force from the Council's Committee on Social Services and were approved in principle by its Executive Committee on September 10, 1975.

The Child and Family Services Act would significantly expand day care facilities available to the children of low-and modest-income working parents, as well as to children with special needs such as those associated with economic disadvantages, neglect or abuse, mental retardation, developmental disabilities and other handicaps, by substantially increasing federal participation in the cost of child care--under a new federal authority and through a new system of services delivery. The bill(s) would provide for nutrition and health services as well as for developmental education and other social services.

We believe that there presently exists in Federal statutes the authority needed to develop and deliver those child care services contemplated by the Child and Family Services Act. Most prominent among these authorities are Social Security title XX which authorizes services, including day care, for families with income up to 115% of the state or national median; title IV-B which establishes Child Welfare Services, including day care for children of working mothers, based upon need alone; and title IV-A which mandates child care services if needed by an AFDC parent enrolled in the Work Incentive Program. Title III of the Elementary and Secondary Education Act provides special opportunities in early childhood education. The Head Start, Equal Opportunity and Community Partnership Act of 1974 continues the developmental day care programs begun under the Office of Economic Opportunity.

Expanded day care services to meet the special needs of developmentally disabled, retarded and other handicapped children would be provided under contemplated amendments both to the Developmental Disablities and the Education for All Handicapped Children Acts. Child health and nutrition services are authorized under federally supported Maternal and Child Health programs;

the Early and Periodic Screening, Diagnosis and Treatment program; School Lunch and School Breakfast programs; the Women, Infants and Children feeding programs and other special nutrition programs.

The problem, therefore, as seen from the point of view of program administrators (including many of the programs noted above), is not the lack of program authority. It is the proliferation of special programs to meet one or another facet of a larger problem, each with its own delivery system and each with its differing eligibility and program-content criteria. It is a lack of authority and incentive to achieve coordination of programs at the Federal, State and local levels. And it is a serious lack of Federal appropriations for some programs such as title IV-B Child Welfare Services, and inadequate Federal financial and program support for others.

If legislation along the lines of the Child and Family Services Act of 1975 is to be now considered, some serious questions should be answered: If existing delivery systems are not to be duplicated, should the child care provided under the proposed legislation be confined to a single purpose, such as enabling parents to obtain or maintain employment? If so, should authority to provide day care for working parents be deleted from titles XX, IV-B and IV-A? If the Child and Family Services Act is, in addition to day care for the children of employed workers, to authorize day care for special needs such as those of the developmentally disabled, the mentally retarded, the abused or neglected--should authority to provide such special child care services under various existing statutes be deleted? Has the demand for day care been sufficiently analyzed to determine the dimensions of need, beyond a tabulation of the number of currently available day care center slots compared with the number of working mothers with children under school age, in-school, etc? To determine the preference of consumers among the various kinds of care, e.g., in-home care provided by a relative or other suitable adult versus family day care provided in the neighborhood versus a day care center setting in the neighborhood or at the work place? How will implementation of title XX impact upon day care previously provided under title IV-A? What kind of coordination of child care services may be accomplished under title XX? What unmet needs will be revealed through the title XX public planning and needs assessment processes? These are but a sample of the questions which concern and perplex us.

Essentially, the Council of State Public Welfare Administrators would be opposed to any proposal which would contribute further to fragmentation, duplication, overlap and gap in social services programs, including child care services. Specifically, we would be opposed to establishing additional services delivery systems such as the prime sponsorship method proposed in S. 626 and H.R. 2966, and we would be opposed as well to the creation of any new administrative agencies at either Federal or State or local levels.

We would be most supportive of substantially increased Federal financial support for services programs, including child care for children of working parents. And we would welcome the provision of Federal incentive for the coordination of services programs--including child care services-- with state level planning, and participation by consumers and providers as well as health, education and social services agencies (title XX is, of course, a beginning step in this direction).

Again, we are very appreciative of your willingness to receive our comments on S. 626 and H.R. 2966. We look forward to cooperating with you toward passage of legislation which would enhance our ability to make child and family services available to all those in need. We will be pleased to provide whatever technical or other assistance you feel would be helpful.

Yours truly,

Wilbur J. Schmidt

Wilbur J. Schmidt
Chairman
National Council of State Public
Welfare Administrators

STATEMENT OF THE JOSEPH P. KENNEDY, JR. FOUNDATION
CONCERNING THE CHILD AND FAMILY SERVICES ACT

The Kennedy Foundation is specifically concerned about the implications of the Child and Family Services Act for handicapped children, and particularly the mentally retarded.

It is questionable whether parents or guardians should be authorized to consent to children's participation in research or experimentation, and such substituted consent is the subject of increasing concern by the courts. It has generally arisen in the context of institutionalization/commitment or sterilization of children, whether as a result of mental retardation, mental health or juvenile delinquency. Such procedures have traditionally been termed "voluntary," but the courts are increasingly reluctant to label them as such, holding instead that children in these situations are entitled to full due process protections to ensure the necessity and appropriateness of the procedures. Although the courts are solicitous of the right of parents to raise their children as they choose, they do not view this parental authority as absolute, recognizing that parents frequently do not act in the best interests of their children, particularly those who are handicapped, and that their decisions may reflect a variety of factors, not all of which stem from a legitimate concern for the health, safety and welfare of the children. Additionally, guardians are often institutional guardians state agencies or individuals associated with the delivery of services or with the proposed research or experimentation, and they should not be in a position to consent to procedures which are of no potential therapeutic benefit to the participants. Human research and experimentation is an area so fraught with potential abuse that the National Commission for the Protection of Human Subjects is presently involved in a thorough examination of all its aspects, including the adequacy and appropriateness of parents' and guardians' substituted consent for their children and wards. Certainly much greater consideration should be afforded this entire area before we broadly legislate that parents and guardians can give or withhold consent to such procedures.

Additionally, appropriate early intervention is crucial to the handicapped, as some handicapping conditions are reversible and others susceptible to substantial amelioration. Thus, programs should be initiated for these children prior to their reaching school age. This is not only a matter of human and personal rights but is also economically sound in terms of obviating the necessity for lifetime custodial care for many handicapped individuals and substituting therefor an opportunity for productive, creative and independent lives. Of the approximately one million handicapped children in this country who are in the preschool age range, almost two-thirds of them are without these necessary early childhood educational and developmental services.

We are of the opinion that the 10% set aside to identify and ameliorate handicapping conditions should also be utilized for the provision of services to the handicapped.

There should be a continuing guarantee of full access to programs and services by handicapped children and due process protections should be ensured with respect to their identification, evaluation and placement.

Because of the importance of physical education and exercise in the improvement of physical functioning of the handicapped, as demonstrated through research and programs such as Special Olympics, we feel that physical education programs should receive explicit mention among the programs and services which may be furnished.

Mental retardation and mental health facilities should be specifically included under those agencies which may be funded directly, and elsewhere throughout the legislation where certain types of facilities are enumerated. In fact, facilities available as recipients of financial assistance should be separately defined.

Under the section dealing with the withholding of grants, reference should be to "failure to comply" rather than "failure to comply substantially," or else the word "substantially" should be defined. It is entirely too subjective a standard for meaningful implementation.

We support those features of the legislation which we consider vital to handicapped children, specifically endorsing the provision of prenatal and other medical care designed to reduce or prevent handicapping conditions; early diagnosis, identification and treatment; and parental involvement, all of which have long been advocated by the Foundation.

October 2, 1975

Senator Walter F. Mondale, Chairman
Senate Subcommittee on Children and Youth
Congressman John Brademus, Chairman
House Select Subcommittee on Education

Gentlemen:

The following is in response to your request for a statement from Greater Minneapolis Day Care Association on the Child and Family Service bills, S.626 and HR 2966:

We applaud your emphasis on the role of parents in decision making on all levels. We feel that the important services to be provided will be relevant only in so far as parents are assured that decision making role.

We still have some question as to the relationship of the State to local prime sponsors and to other federally funded programs that provide services to families. Perhaps there is a need for legislated coordination at the State level.

The concern of many in the child care field for permitting options is inherent in the Bill. We at Greater Minneapolis Day Care Association sincerely believe and work toward reinforcing options, with room for services being provided by public schools, the private non-profit and for-profit sectors, as well as the publis services. The choice must lie with parents and the control must remain with parents.

The amount of appropriation written into the bill is, of course, not enough to do the job, but it is a beginning and we recognize the important implications of beginning.

Greater Minneapolis Day Care Association
Edwina L. Hertzberg, Executive Director 430 Oak Grove Suite B10 Minneapolis, Minnesota 55403 612/871-3103

Also, we applaud the emphasis on planning in the first year. Many think we have done enough planning; we believe we have hoped and dreamed but we have not solidly planned and we at GMDCA see planning - long and short range - as essential.

We wish you success with the Bill and are willing and ready to provide whatever assistance we can in assuring its passage.

Sincerely,

Edwina L Hertzberg

Edwina L. Hertzberg
Executive Director

National Council of State Committees for Children and Youth

October 16, 1975

The Hon. Walter Mondale
Senator from Minnesota
U. S. Senate
Senate Office Building
Washington, D. C. 20510

Dear Senator Mondale:

The National Council of State Committees for Children and Youth, in response to your invitation, submits its response to S-626, the Child and Family Services Bill.

The need for comprehensive high quality child care services continues to increase while the response to this need has been limited to the Federal Interagency Day Care Requirements, implementation of which would severely tax the resources of the states. Efforts begun in 1971 by you and Congressman Brademas which have been developed to the present S-626 could provide the basis for an adequate day care program.

The National Council of State Committees for Children and Youth recognizes the need which the legislation being proposed in the Child and Family Services Act seeks to meet and the Council supports the concept of early intervention in the development and care of children. The Child and Family Services Act has strengths which might be expected to bring about the desired intent of its sponsors and supporters, namely improvement of child care facilities at the community level. The inclusion of building funds in this bill should be especially noted and commended as this is a chronic unmet need in the development of day care resources.

The Council is concerned that several major items remain unclear in S-626 which should be clarified by the legislative designers and supporters of this bill, not at a later date through regulations written by HEW administrators. These points are critical to any successful implementation of S-626 and must be resolved prior to receiving support of the National Council of State Committees for Children and Youth.

. The concept of "Prime Sponsor" remains a major area of question. The Council views the bypassing of existing state structures as inappropriate.

- The level of funding is not clear in S-626 and should be more clearly specified.

- Where does S-626 fit into Title XX?

Thank you for this opportunity to comment on S-626. The Council urges you to persevere in your efforts to improve day care services through this and other legislation.

Sincerely,

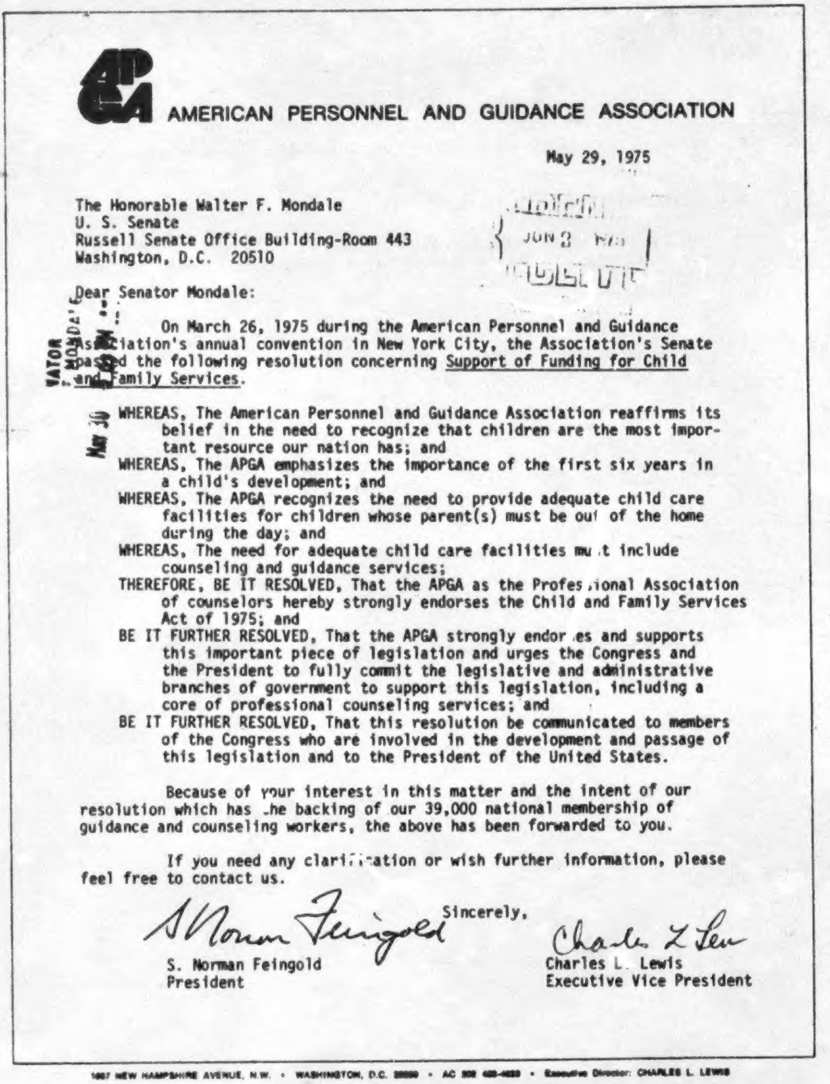
Janet A Shriner

(Mrs.) Janet A. Shriner
National Legislative Chairperson

Everett D Lantz

Everett D. Lantz
President

JAS:EDL:rmm



AMERICAN PERSONNEL AND GUIDANCE ASSOCIATION

May 29, 1975

The Honorable Walter F. Mondale
U. S. Senate
Russell Senate Office Building-Room 443
Washington, D.C. 20510

JUN 3
MAY 30

Dear Senator Mondale:

On March 26, 1975 during the American Personnel and Guidance Association's annual convention in New York City, the Association's Senate passed the following resolution concerning Support of Funding for Child and Family Services.

WHEREAS, The American Personnel and Guidance Association reaffirms its belief in the need to recognize that children are the most important resource our nation has; and
WHEREAS, The APGA emphasizes the importance of the first six years in a child's development; and
WHEREAS, The APGA recognizes the need to provide adequate child care facilities for children whose parent(s) must be out of the home during the day; and
WHEREAS, The need for adequate child care facilities must include counseling and guidance services;
THEREFORE, BE IT RESOLVED, That the APGA as the Professional Association of counselors hereby strongly endorses the Child and Family Services Act of 1975; and
BE IT FURTHER RESOLVED, That the APGA strongly endorses and supports this important piece of legislation and urges the Congress and the President to fully commit the legislative and administrative branches of government to support this legislation, including a core of professional counseling services; and
BE IT FURTHER RESOLVED, That this resolution be communicated to members of the Congress who are involved in the development and passage of this legislation and to the President of the United States.

Because of your interest in this matter and the intent of our resolution which has the backing of our 39,000 national membership of guidance and counseling workers, the above has been forwarded to you.

If you need any clarification or wish further information, please feel free to contact us.

Sincerely,

S Norman Feingold
S. Norman Feingold
President

Charles L Lewis
Charles L. Lewis
Executive Vice President

1607 NEW HAMPSHIRE AVENUE, N.W. • WASHINGTON, D.C. 20009 • AC 202 483-4633 • Executive Director: CHARLES L. LEWIS

Senate Subcommittee on Children
and Youth
Senate Office Building
Washington, D.C. 20510

October 27, 1975

Dear Sir:

The Midwest Association for the Education of Young Children, composed of ten states of which ours is one, urges your support for the Mondale-Brademas Child and Family Services Act of 1975 (S626/HR2966).

Enclosed is a Resolution adopted by the 1975 Midwest AEYC annual conference in Madison, Wisconsin, which was attended by over 1300 people from all our ten midwestern and other states vitally focused on early childhood care and education. This Resolution calls upon you for support of the Mondale-Brademas bill.

A growing awareness of the woeful lack of child-care facilities across this nation as well as of the dire need to upgrade the quality of care in many of the presently operating programs and centers for young children prompted the drafting of this Resolution by the Midwest AEYC.

On behalf of the Midwest AEYC members in our state, I urge, petition, and importune you to support this bill in your communication with fellow legislators, and with your vote when it comes before the Senate or the House.

Yours very sincerely,

Fran Silverman

Midwest AEYC Council

WHEREAS families and children in this country need additional programs supported by Federal funds; and

WHEREAS Senator Mondale and Representative Brademas have introduced Federal legislation for children and families;

THEREFORE BE IT RESOLVED that the attendees at the 1975 Conference of the Midwest Association for the Education of Young Children, who come from the states of Iowa, Illinois, Indiana, Nebraska, Kansas, Michigan, Minnesota, Missouri, Ohio, and Wisconsin

1. Endorse the concept of the Mondale-Brademas Child and Family Services Act of 1975 (S626 and HR2966)
2. Endorse the intent of control being vested in local councils as long as the democratic process is insured and maintained at all levels of decision-making
3. Urge communities to recognize the need to coordinate existing programs, examine the use of existing funds within the community, and identify gaps in service.
4. Support the concept of a variety of prime sponsors for child and family services programs, and urge that provision be made in the bill to insure such variety
5. Urge all Senators and Representatives to become co-sponsors of this vital bill and the appropriations measure necessary to support it
6. Urge all affiliate groups to mobilize support in their own communities to insure Presidential approval of the bill
7. Urge conference participants at the 1975 Midwest AEYC Conferences to forward copies of this resolution to Members of Congress representing the ten states who have persons in attendance at this conference; members of the Senate Subcommittee on Children and Youth and the House Subcommittee on Select Education; the Secretary of Health, Education and Welfare; and the Acting Director of the Office of Child Development.

This resolution was composed and adopted originally by the Legislative Caucus of the 1975 Conference of Midwest AEYC and was further endorsed by the Caucus on Title XX and the Caucus of Wisconsin, Illinois, and Missouri at the Conference.

GWEN G. MORGAN
BOX 21 • LINCOLN, MASSACHUSETTS 01773 • (617) 259-8645

June 24, 1975

To : Jack Duncan

From: Gwen Morgan Gwen Morgan

Subject: Comments on the Questions asked by Congressman Alphonzo Bell

The following are my personal responses to the excellent questions developed by Congressman Bell. They do not represent the position of any organization.

1. I believe that the demand for day care has been over-estimated, and that the total cost will not be as great to meet the demand as many have feared. My own estimate to meet the need for day care among those children whose families will want day care, say ten years from now, is $9 billion for the children younger than school age. I do not know how to estimate the cost of school aged care, but the cost of that are not as far outside the reach of most families as are the costs of programs for young children.

A. The legislation should emphasize as a goal the serving of all children whose families want child development programs. I would be opposed to making the programs anything except completely voluntary. Parents should be able to do their own estimating of what the costs and the benefits to them would be, and to make their own decisions. In Massachusetts, 39% of all parents want to care for their own children at home, and another 10% have relatives who can care for them.

B. Children should be selected, at the center level, or the family day care system level, based on a set of national priorities. However, it would be poor public policy if priorities were so rigid that all the need in one category had to be met before another category could be served. This would mean a cost-wasteful system of holding spaces open, a system which federal policy has forced on programs in the past. Or it would mean transporting children from outside the community, destroying one important goal of the program to contribute to community-building. Intake should admit children in the order in which they apply, but selecting among them based on priority when there are several applicants for one space.

C. Programs should serve all the children in the community, based on their need for the service, not on their income. Day care need may exist at every level of income in the community. A single parent father, for example, may earn $15,000, but that does not in any way diminish his need for day care. The same is true exactly for single parent mothers, and for wives of low-wage fathers.

Since we already have Head Start to provide services on a part-day basis to the poor who are not working (presumably), and Title XX and WIN for Welfare recipients, child welfare cases, and low-income families, perhaps this bill should emphasize those families who are working out of economic necessity, whose income, whatever it is, is contingent on the ability to work, which may be contingent on the availability of child care or else on a decision to accept inadequate arrangements for the children in order to have the income and avoid Welfare. It may be time to give priority to the children in working families.

D. Income should not be used as a criterion for eligibility. The criterion should be need for day care or early childhood programs. Income should be used to determine the fee to be paid, but not eligibility.

E. Children whose parents are above the poverty line should be allowed to participate in these programs if they pay a fee based on their ability to pay. This is absolutely essential because of the desirability of an integrated socio-economic mix of children, and in order to avoid the injustice of underwriting child care while insisting that those who use it may not be given economic opportunity. Present policy, if economic opportunity is the goal, defeats the attainment of that goal by its very definition. Participants must be poor and stay poor. They must either limit or conceal their earnings. Those whose employers, like many employers, want to give them opportunity for advancement, must not accept those opportunities. Those whose employers want to give them dead end jobs at exploitative wages can count on the underwriting of their exploitation by the federal government.

F. Every child who comes from a poor family does not require child care services. If the family is employed and has not resources for child care, they will need the service. If the family wants an educational and healthful part-day experience in a group, it should be available to them. If there are serious family problems, they will need child care. If the child has a disability, of any kind, such programs will be needed. But for those children who are in poor families without serious pathology, whose mothers are not working, and who do not choose to send them to a group program, there should not be any compulsion.

2. The important aspects of quality are the so-called intangibles which are very difficult to measure, but not very hard to know. Parent education will be the best way to assure that these intangibles are demanded and assured for the children. As far as enforcement of federal standards, we need to use our best knowledge at a given time to write the best standards we can, with a process for later improvement. Therefore standards should not be written into the law. What should be mandated in law is the process for developing and changing standards - a process which brings together broad interest representation including academic experts, parents who are subsidized, parents who pay a large part of the cost, providers of care, both staff and administrators, and civic leaders to develop new standards, give them wide public hearing in order to develop concensus, and a mandate to an agency to promulgate them, and to review them by the same process at least every five years.

B. We should not use the Head Start program as a model. It is based on a deficit view of the children it serves, surely not a way in which federal policy should look at American children.

C. An adequate ratio of staff who work directly with the children are necessary, both to assure their physical safety in the event of fire or other disaster, and to be sure that the children are given loving individual attention as their parents would care for them if they could be present. These staff, both professional and pre-professional, should understand, as parents understand, how children learn, how their personalities develop, and how they need nurture to grow.

Specialized medical attention should be available to children in day care just as it is needed by children when they are at home. It is not a part of day care, but a service needed by children wherever they are. The same is true of social services. All children eat, and need nutritious food, and the day care program must have someone on staff with this knowledge, or must purchase it from an outside consultant since it is an integral part of the day care.

page three

Their presence does not guarantee quality, but their absence would indicate that children's needs are not met. However, it is open to debate whether health care and social services belong in the day care budget or the community health or family service agency's budget. The fact is, however, that they must be budgeted somewhere. If the child development bill does not budget them, it must include outside sections mandating that they be budgeted in the other systems.

D. Head Start is a compensatory model for poor children, who were considered by its designers to be "deprived." I am not enthusiastic about that view of the poor, and certainly would not favor its being expanded. Programs for children should be designed to preserve the health of children and to promote and support the health of their families.

I am uneasy with government and professional intervention into the family unless there is clear and present danger of harm for children. When there is not such danger, parens patriae becomes a dangerous course of action for the state, undermining the autonomy and health and self esteem of the family.

The model for a national policy should be one which builds back community support for the family which has eroded in our time due to urbanization and other factors.

E. Social workers, psychologists and nutritionists are needed by some children whether they are at home or in child development programs, and society must think through the best funding mechanism for that. When children are in child development programs, a service delivery model, apart from the funds, would work best if the service comes to the group of children rather than transporting the children to the service.

I do not believe that all families need case work counseling, and I am opposed to any view of day care, which would build in such a unnecessary component, like the unneeded fireman on the train. However, there is a need for a staff person to work with parents.

F. Children are learning all the time, whether they are with their parents or in a group experience. Any program which did not enhance this learning would deprive the child of the teaching his or her mother would provide if she were with the child, and would in my opinion do harm. Therefore education is essential as an aspect of what the generalist staff are doing with the children, along with the other things they pay attention to. I don;t see a need for some kind of outside "component" - education is a part of life, and very intertwined with personality development, physical growth, and enjoyment of life.

G. Priority should be given to use of existing buildings in a community, especially schools which have extra space. Schools were usually not designed with young children in mind, so that renovation funds are essential, and the bill should include grant funds for this purpose. I would like to see some new buildings specifically designed for day care in areas where existing buildings are not available, but I do not recommend grant funds for that. Instead a revolving fund with interest free loans should be available to programs whose local Planning Board attests that these is a need for new construction and no available space in existing buildings. The repayment of the loan should be an allowable expense in the rate-setting for the operating budget.

H. There should be a mix of professionals and pre-professionals, the latter members of a child's own community. It is important for the program, parents and community that the existing body of knowledge about children be applied to the program through the employment of some professionals. It is equally important to the child and parents' own self-esteem that members of the community be there as models, regardless of whether those members of the community have been able to have a college education.

The important thing is that there should be a bridge, through successful years of experience, in-service training, and the taking of courses outside the center, so that the pre-professional can aspire to fill the job held by the professional. The system should provide its own career development ladder.

Funds for training should be available as part of the operating budget of the program at the center level.

21. The ideal worker to child ratio is 1 - 3 for children under 2
1- 4 for children between 2 and 3
1 - 5 for 3 year olds
1 - 10 for 4 year olds.

This should be the goal for quality in American child care. However, it is not necessarily practicable to meet this goal at present in every part of the country, particularly if some of the parents will be paying fees out of their own pockets.

Because a fairly large number of adults is necessary in order to evacuate children from a building in the event of fire, federal fiscal requirements for child staff ratio, if there is a requirement, should not be lower than
1-4 for children under 2
1-8 for three year olds and two year olds
1-10 for four year olds.

Any less staff than that would surely be faced with too great a problem in the event of fire, and therefore the fire safety experts would probably insist on very expensive sprinklering of all buildings, and fire proof construction.

It is important that the way of computing the staff-child ratio be uniform. The above ratios should be used in computing the number of staff hours required in a center based on the number, ages, and hours of attendance of the children. Total staff hours in a center must equal or exceed the sum of the staff hours required by the ages, number and hours of attendance of the children.

J. Should parents be involved in the programs? Parents should be offered the right to visit at any time and to observe their child in the classroom, and to have a report of his or her progress from the center or family day care system or home. Regular parent activities and conferences should be sponsored. Parents should be encouraged, but not required to participate on the governing board of the program (not a separate policy committee). Centers should be required to give serious consideration to any suggestion from groups of parents, and should either follow the suggestion in policy or explain in writing the reasons for the decision not to follow it.

I am opposed to mandatory requirements that all parents must participate on so-called policy boards which are not the same as the governing boards. This requirement has led to unrealistic expectations on the part of staff, and to biases against the parents which will affect the child's selfesteem. Certainly centers should employ parents who wish to pursue careers in the field of child development.

K. Children's meals should be determined by the hours they are in the program. A proportion of their total nutritional needs must be met: 2/3 if they are there for more than 7 hours.

L. Each community should have one center open 24 hours a day, and other centers offering care for the fulltime employed mother should be open for 10 hours a day However, children should be in the centers only for those hours when their parents need help with their care. A child who is in care because his mother works part time should not be in a center all day long. A child whose mother works all day long should not be sent home at 3 o'clock, or at noon, forcing the family to make another arrangement, and putting the child through an extra daily separation experience.

The type of program a child needs is a good one. Good and bad care can be provided either by centers or by family day care homes, or by group homes. A good family day care system offers both options to parents, and may be a program form to encourage: groups of satellite homes operating in relation to a center of excellence which offers administration, services and training to the homes, and which includes the homes as a regular part of its total program.

Whether center or home-based, the program should see the child in a family context, rather than being entirely child-centered and program-centered. It should respect parents as partners. It should respond to the child as an individual rather than treating him or her only as a member of a group. Children need to be protected from harm, to be loved, to build trust, to develop self-esteem and competence, to learn the inviolability of persons and things, to learn skills and ideas, to satisfy curiosity, and to have a variety of opportunities to use play materials to develop small and large muscle control, and to get concrete experience with with world, from which they will later form concepts. This means staff must know how and gain training in how to do all these things, just as parents do. It does not mean some outside educational "component" or pre-packaged "curriculum."

3. The schools should provide education for parenting for junior high and high school age children, and develop in the direction of offering this kind of expertise and knowledge generally to the parents in the community through educational programs and in other ways. To do this, schools need to develop this knowledge further. One important thing for the present and for the future role will be to build an ongoing relationship between schools and the private pre-school programs and those offered under other public auspices. This is needed in order to make a good transition for the children, since all the children in center care, or in family day care, will be going on to the schools. But it is also important as a way of bringing what the schools have to offer and making it available to the other programs in the community, and bringing the specialized knowledge which exists in the community about young children to the schools.

Schools should have the primary role in financing an educational experience for all children with special needs, whether they do this in the school or whether they "buy in" to the local nursery or day care program.

Those schools which wish to do so should be encouraged to establish part day nursery schools for young children, and particularly to make space available for parent cooperative nursery programs.

But for infant care, family day care systems, and most of the full-day care needed by working mothers, the schools' role should be supplemental, working together as partners in the interest of a future successful transition when the children enter public school .

Mr. **Brademas.** The subcommittee is adjourned.

[Whereupon, the subcommittee adjourned at 11:46 a.m.]

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